Medical Economics



Behind the tangled web of specialism:

SPECIALTY



Kolantyl is much more than an antacid

Clinical experience clearly indicates that alkali is not the only answer to ulcer pain. 1-5

More than an antacid is needed. Kolantyl is more than an antacid. It blocks all three sources of ulcer pain. An antispasmodic (safe Bentyl) to stop pain-producing spasm. Anti-enzyme action to curb peptic erosion. Balanced antacids that neither constipate nor laxate. Plus a demulcent to promote healing.

Shotgun therapy? Probably not, when you consider this: Which one of the ingredients of Kolantyl can an ulcer patient do without?

Dosage: 1 tablespoon, or 2 tablets, every three hours, as needed.

REFERENCES: 1. Altschule, Mark D.: Med. Science 6:560, Oct. 25, 1959. 2. Kasich, A. M.; Boleman, A. P., Jr., and Rafsky, J. C.: Am. J. Digest. Dis. 1:361, 1956. 3. Roth, J. L. A.; Wechsler, R. L., and Bockus, H. L.: Gastroenterology 31:493. 1956. 4. Rafsky, J. C.: Gastroenterology 27:29, 1954. 5. Ruffin, J. M. Baylin, G. J.; Legerton, C. W., and Texter, E. C., Jr.: Gastroenterology 23:252, 1953.

THE WM, S. MERRELL COMPANY New York . Cincinnati . St. Thomas, Ontario

Medical Economics

NEWS BRIEFS

THE NEXT RECESSION "will get under way by the middle of 1961 and will be mild and short." That's the opinion of 20 top U.S. economists, says the newsletter Report for the Business Executive. They expect personal income to fall only 1%-2%.

U.S. GOVERNMENT IS NOW SPENDING \$3,400,000,000 yearly on health care, the latest U.S. Budget Bureau figures show. That's 1/20th of the Federal budget.

MEDICAL MANAGEMENT FIRM IS IN TROUBLE with its agents. Two Washington, D.C., men who bought a \$14,500 franchise from Medical Management, Inc., of Dayton, Ohio, just before it recently went into receivership and was reorganized, are suing to void the franchise on grounds that it's worthless.

MORE TAX SLEUTHS: If an appropriations bill the Senate has passed gets by the House, the I.R.S. will be able to add some 2,900 full-time employes to its enforcement staff for the next fiscal year.

en

he

cer

ts.

ence

man, 361,

ckus.

fsky, . M.;

NEWS BRIEFS

IF YOU'VE AN INCOME TAX REFUND DUE YOU and it hasn't arrived yet, better check with your local tax office. The I.R.S. says refund checks, even for those who filed at the last minute, should arrive within 4 or 5 weeks after returns were filed.

LETTING PATIENTS STAY AN EXTRA DAY in the hospital costs more than most doctors realize, the Florida Medical Journal points out. If half of Florida Blue Shield's participating physicians "permit one excess day of hospital care for one patient," it says, "the daily cost amounts to \$60,820."

MEDICAL PRACTICE ISN'T A COMMERCIAL VENTURE, the I.R.S. decided in a recent case involving rents paid by doctors. But the Tax Court has reversed the I.R.S. decision. "It would be ignoring realities," the court ruled, "to say that a doctor... does not...have as one of his primary motives in practicing [medicine] the production of a livelihood for himself and his family."

WARNING ON MUTUAL FUNDS has been issued by S.E.C. Chairman Edward N. Gadsby. He says there's a question "whether mutual funds have become captives of particular advisers" and whether their management fees have become "what might be termed monopoly prices." What's needed, he says, is "increased stockholder participation" in the funds' affairs.

BUREAUCRACY BOOM: 8,500,000 civilians are now local, state, or U.S. Government employes, the Tax Foundation reports. That's 1 out of every 21 Americans.

THE WORDS "LLOYD'S, LONDON AND/OR COMPANIES" won't appear on new malpractice policies issued to doctors in most states. Because one "and/or" firm-British Commercial-went bankrupt, Lloyd's has ruled that policies bearing its name must apply only to that portion of the risk that Lloyd's has assumed. In other words, a doctor who has part of his coverage with Lloyd's and part with another carrier must now be issued two separate policies.

BLUE SHIELD MUST PAY STATE EXCISE TAXES, the Oregon Supreme Court has ruled. It made the ruling despite the fact that the U.S. Treasury has exempted Oregon Blue Shield from Federal excise tax.

ARE DOCTORS PRACTICING POORER MEDICINE because of the growing threat of malpractice suits? A new MEDICAL ECONOMICS survey of 2,200 physicians shows that one doctor in five thinks so. The three reasons cited most often: (1) Doctors have taken to "spraying patients with X-rays" unnecessarily. (2) They're shying away from many risky but clinically desirable procedures. (3) Many M.D.s are refusing to undertake certain high-risk but potentially beneficial procedures in any case.

NEWS BRIEFS

THE BIGGER A DAMAGE SUIT IS, the more likely it is to come to trial, a new Columbia Law School study shows. Of claims resolved for less than \$3,000, it found, only 1 in 20 reaches court. Of those resolved for more than \$3,000, 1 in 5 comes to trial.

THE TAXPAYERS LOST most of their civil tax suits against the I.R.S. in fiscal '59. In district courts, they won 200 cases, lost 168. In the Court of Claims, they won 18, lost 57. In the circuit courts of appeals, they won 130, lost 230. And in the Supreme Court, they won none, lost 23.

HOW EFFECTIVE IS "INFLAMMATORY" EVIDENCE in personal injury cases? In a recent Yale Law School experiment, mock juries were given two presentations of an identical damage suit: the first time with oral testimony only; the second with such evidence as torn and blood-stained clothing, etc. The jurors' average award after the first presentation was \$6,777. After the second, it was \$32,500.

FOREIGN INTERNES AND RESIDENTS will be in short supply for at least a year, judging by the results of the latest tests given by the Educational Council for Foreign Medical Graduates. Of 6,029 foreign M.D.s taking the test—which they had to pass to qualify for the full year's interneships and residencies starting this July—only 3,345 qualified.

⁴ MEDICAL ECONOMICS · MAY 23, 1960

allergic nose?

Dimetane Works! with side effects as few as placebo

-New England J. Med. 261:478, 1959 (Schiller, I. W. and Lowell, F. C.)

Dimetane works with an effectiveness of 91% in respiratory allergies

— NEW YORK J. MED. 59:3060, 1959 (Fuchs, A. M. and Maurer, M. L.).

In allergic and pruritic dermatoses the effectiveness rate of Dimetane is 94.6%—ANTIBIOTIC MED. & CLIN. THERAPY 6:275, 1959 (Ludowe, I. I.).

The A.M.A. Council on Drugs characterizes Dimetane as demonstrating "...a high order of antihistaminic effectiveness and a low incidence of side effects."

—J.A.M.A. 170:194, 1959.

for your next allergic patient B DIMETANE Extentabs® (12 mg.), Tablets (4 mg.), Elixir (2 mg./5 cc.), new DIMETANETEN Injectable (10 mg./cc.) or new DIMETANETOO Injectable (100 mg./cc.).

4. H. ROBINS CO., INC., RICHMOND 20, VIRGINIA / ETHICAL PHARMACEUTICALS OF MERIT SINCE 1878

now...
an
iron-plus
formula
with the
"plus"
in the
iron
itself



CHEL-IRON PLUS

CHELATED IRON...like the iron of hemoglobin...clinically confirmed as effective in hematopoiesis¹...with a built-in molecular barrier against g.i. intolerance and systemic toxicity.^{1,2} Permits administration on empty stomach for greater iron uptake...safeguards children in the home against growing problem of accidental iron poisoning.^{1,3} PLUS ESSENTIAL VITAMINS...effective levels of B₁₂, folic acid, five other B vitamins, and C—with particular emphasis on pyridoxine, especially important during pregnancy.

Usual Dosage: 1 tablet t.i.d.

Also Available: CHĒL-IRON Tablets, Liquid, and Pediatric Drops.

1. Franklin, M., et al.; J.A.M.A. 166:1685, 1958. 2. A.M.A. Council on Drugs; J.A. M.A. 127:891, 1959. 3. A. M.A. Committee on Toxicology: J.A.M.A. 170:676, 1959.



. U. S. PAT. 2,575,611

6 MEDICAL ECONOMICS - MAY 23, 1960

Medical Economics

INDEPENDENT NATIONAL BUSINESS MAGAZINE FOR PHYSICIANS, MAY 23, 1960

contents

Very often you can turn an initial loss on your old professional car into an ultimate tax gain. Here's how it's done

Could You Resist This Stock Salesman's Pitch? 72

Here's the transcript of an actual phone conversation between a high-pressure over-the-counter stock promoter and one of his prospects. Do you think you'd be able to hold firm against these get-rich-quick promises?

Behind the Web of Specialism: Specialty Boards . . . 80

Are the boards too unrepresentative in their membership, too arbitrary in their requirements, too poorly coordinated for the whole profession's good? Five out of six of the 1,084 specialists we surveyed think so

Know Where You Stand Before You Sterilize 87

Preventive medicine—or mayhem? Kindness to the patient—or an invitation to sue? The answers aren't simple, but they're important, as this lawyer-doctor symposium shows

More

Copyright © 1960 by Medical Economics, Inc. All rights reserved under Universal and Pan-American Copyright Conventions. Published forthightly at Oradell, N. J. Vol. 37, No. 11. Price 60 cents a copy, \$12.50 a year (Canada and foreign, \$15). Circulation, 170,500 physicians in private practice. Address all editorial and business correspondence to MEDICAL ECONOMICS, Oradell, N.J. For change of address, use the form on page 186.

the quality The following the

REPORTS IN HUNDREDS OF LEADING A Series AND INCOMES AND SCORES OF STANDARD AND SCORES OF SCHOOLOGE OF SC

The control of the co

THE RELIANCE A. & BODE, J. H., Den MICHAEL SCHOOLE SUFFRAMME, Sep-COVERS THE PREDOMINANT PAININGER ASSURES SAFETY: 307-309, 1051.

ROCHE stone, R. M. & Healey, A. E., Arch. Ophth. 19. 32

contents

Drop an Insurance Policy for a 'Better' One? 95

No matter what the salesman tells you, he's the only one likely to benefit when you swallow his sales talk and swap an old life insurance policy for the latest model. Consider these facts before you consider making a substitution

Let her learn by trial and error? Hand her a written list of her duties? Ask only that she use common sense? Not unless you want to waste time and invite trouble, says this management consultant. Here are suggestions for shortening the period of suffering employer and new employe must undergo

A concept that's dear to many doctors proved nothing but a pain to this man. When he found that it was creating more problems than it solved, he took a long, careful look at the situation and came up with what he feels is a workable alternative to the unworkable telephone hour

There's money to be made on automation and a wide variety of stocks to select from. But the earnings of most have been anything but stable, so you'll want to consider these key calculations of the industry's prospects before you invest in any of the companies that build those big machines

More



multiparas need more...

NATALINS COMPREHENSIVE

give them more...more iron, more calcium and more vitamin C

Natalins Comprehensive tablets are formulated to meet the special vitamin-mineral needs of the multipara, whose nutritional stores may have been depleted by successive pregnancies.

Obviously, they are ample for the primigravida

as well. Supplying generous amounts of *iron* (40 mg.), *calcium* (250 mg.), and *ascorbic acid* (100 mg.), each Natalins Comprehensive tablet also provides significant quantities of nine other important vitamins and minerals. Recommended dosage is only one tablet daily.



contents

'Our medical jargon not only confuses the public,' says this physician, 'it also helps us confuse our colleagues'

Lowest-Cost Way to Get to Europe 179

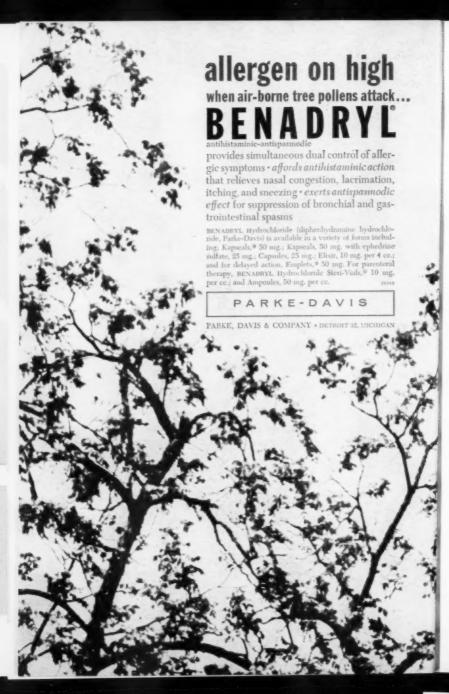
Groups are the thing these days—not merely group medicine but also group travel. Ever thought of chartering a plane for a jaunt with your fellow M.D.s and their families? Here are some tips from doctors who have done it

BOOK FEATURE

What's Wrong With American Diplomacy 211

American foreign policy 'reminds me of only one thing: a dead man in one of your jammed subway crowds. He looks alive only because he is held up by the crush of the people.' This vivid quote from a European journalist keynotes Emmet John Hughes' 'America the Vincible,' the best-selling book that suggests how we can pump new life into American diplomacy. Until recently, Mr. Hughes was head of the foreign news service of Time-Life-Fortune. Earlier, he helped with speech-writing in both Eisenhower Presidential campaigns. He served for the year 1953 in the White House as an Assistant to the President. Foreign affairs have been his business for twenty years, more than half of which he spent in Europe. His diagnosis of our plight: a dangerous addiction to simple falsehoods in preference to complex truths. His Rx is given in 'America the Vincible,' selections from which appear here More >

als.



contents
DEPARTMENTS
News Briefs 1
Letters
News
'M.D.s Need More Collection-Agency Control' 29
Emergency-Room Service Has Legal Hazards 29
Court Assures Doctors They're Not Storekeepers 32
Teaching Staff Wins Higher Retirement Age 37
Rule Requiring Two Surgeons Scored by M.D.s 37
As Welfare State Grows, So Does Suicide Rate 42
Doctor's Safe if Patient Signs General Release 42
Psychology Makes Deadbeats Pay Their Bills 46
British Offer Visiting Colleagues Special Aid 50
This Trust Fund Makes Money for Doctor's Widow 54
'Bigger Hospital May Be a Big Mistake' 54
Malpractice Award Bankrupts Doctor
Can Trustees Fire a Staff-Approved M.D.? 62

SHORT FEATURES

Anecdotes	0		0	٠	0			9	0	0	0			9		0	0	9	. 79),	94,	110,	20	4
Cartoons .						70	0.	,	7	7.		84	1.	(90).	9	3.	96,	1	100,	128,	290	C



FOUND:

a dependable
solution to "the
commonest
gynecologic
office problem"

"VULVOVAGINITIS, CAUSED BY TRICHOMONAS VAGINALIS, CANDIDA ALBICANS, Haemophilus vaginalis, or other bacteria, is still the commonest gynecologic office problem . . . cases of chronic or mixed infection are often extremely difficult to cure." Among 75 patients with vulvovaginitis caused by one or more of these pathogens, TRICOFURON IMPROVED cleared symptoms in 70; virtually all were severe, chronic infections which had persisted despite previous therapy with other agents. "Permanent cure by both laboratory and clinical criteria was achieved in 56...."

Ensey, J. E.: Am. J. Obst. 77:155, 1959

TRICOFURON Improved

■ Swiftly relieves itching, burning, malodor and leukorrhea ■ Destroys Trichomonas vaginalis, Candida (Monilia) albicans, Haemophilus vaginalis ■ Achieves clinical and cultural cures where others fail ■ Nonirritating, esthetically pleasing

2 STEPS TO LASTING RELIEF

1. POWDER for weekly insufflation in your office. MICOFUR®, brand of nifuroxime, 0.5% and FUROXONE®, brand of furazolidone, 0.1% in a water-dispersible base.

2. SUPPOSITORIES for continued home use each morning and night the first week and each night thereafter—especially during the important menstrual days. MICOFUR 0.375% and FUROXONE 0.25% in a water-miscible base.

Rx new box of 24 suppositories with applicator for more practical and economical therapy

NITROFURANS—a unique class of antimicrobials EATON LABORATORIES, NORWICH, NEW YORK

14 MEDICAL ECONOMICS · MAY 23, 1960

Medical Economics

WILLIAM ALAN RICHARDSON, Editorial Director R. CRAGIN LEWIS, Editor DONALD M. BERWICK, Senior Editor LOIS R. CHEVALIER, JOHN R. LINDSEY, Roving Editors

Consulting Editors

DAVID BECK, M.D. HENRY A. DAVIDSON, M.D. ALFRED P. INGEGNO, M.D. IRVING M. LEVITAS, M.D.

Associate Editors

ROBERT L. BRENNER M. J. GOLDBERG LOIS HOFFMAN

WILLIAM N. JEFFERS ARTHUR M. OWENS

CLIFFORD F. TAYLOR GEORGE WILLARD

JOHN A. NALLEY, Administrative Editor

HOWARD R. LEWIS, Special Projects Editor

ROXANNA SAYRE, News Editor

A. ROBERT FERGUSON, News Associate
PEARL BARLAND, JANE A. BLOOD, Research Associates

ELIZABETH F. BULLIS, Research Assistant

Editorial Contributors

HELEN C. MILIUS CLARON OAKLEY THOMAS J. OWENS

Editorial Assistants

BARBARA E. KERR ELIZABETH N. OTTO NANCY J. WALL

WILLIAM L. SERIO, Art Director MARGUERITE S. HECKING, Production Editor

JOSEPH COLEMAN, Art Production Manager

Art Associates

GARY L. HOEDEMAKER GEORGE R. TORJUSSEN

Production Associates

PHYLLIS MARCUCCIO RUTH F. TOMPKINS GRACE M. VOORHIS

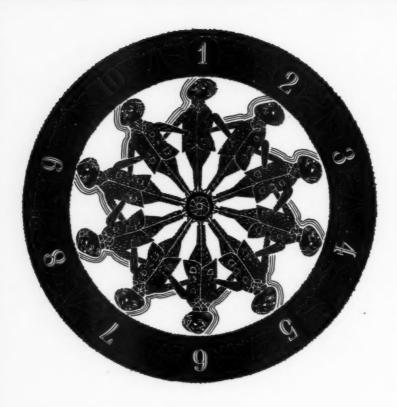




LANSING CHAPMAN Publisher W. L. CHAPMAN Jr. General Manager J. E. VAN HOVEN Production Manager

DOUGLAS B. STEARNS, PHILLIPS T. STEARNS, Sales Managers HOWARD B. HURLEY, Circulation Director

PICTURE CREDITS: Cover, 81, Lika and Razel Associates, Inc. • 70, Leo Kesner • 72, 74, Eric Schweikardt • 73, 75, James McAnally, Graphic House, Inc. • 77, H. G. Roesler • 84, John A. Ruge • 90, William F. Brown • 93, Charles Rodrigues • 96, Victor Sarin • 100, David Harbaugh • 116, 119, Snuffy McGill • 128, Larry Katzman • 158, Roy L. Fox • 212, Clifton Wheeler • 290, Al Kaufman.



Antivert 9 TIMES OUT OF 10!!

The latest antivert report confirms earlier findings: antivert relieves vertigo in 9 out of 10 patients. This combination of meclizine (an outstanding antihistamine for vestibular dysfunction) and nicotinic acid (the drug of choice for prompt vasodilation) "... proved more effective than the use of either drug alone." Out of 50 patients with Meniere's syndrome, only 4 failed to respond to Antivert.

Prescribe one ANTIVERT tablet (12.5 mg.

meclizine; 50 mg. nicotinic acid) before each meal for relief of Meniere's syndrome, arteriosclerotic vertigo, labyrinthitis and vertigo of nonspecific origin.

Supplied: In bottles of 100 blue-and-white scored tablets. Prescription only.

Referencer 1. Menger, H. C.: Clin. Med. 4:313 (Mar.) 1967. 2. Scal, J. C.: Eye Ear Nose & Throat Month. 58:738 (Sept.) 1969.



New York 17, N.Y.
Division, Chas. Pfizer & Co., Inc.
Science for the World's Well-Being

Letters

No World War III?

SIRS: In his book "Men and Atoms," which was featured in a recent issue of MEDICAL ECONOMICS, William L. Laurence maintains that America's development of the hydrogen bomb will surely prevent World War III. But will it? In view of the malignant mutual distrust between the United States and Russia, can more and bigger bombs insure continuing peace?

It seems to me that only a handful of men are making an honest effort to prevent another war. These men are the pacifists who protest all preparations for atomic and biological warfare.

> Wilhelm Moser, M.D. Central Bridge, N.Y.

Internists' Demands

SIRS: "Internists Are Winning Higher Fees" shows us what the men in this specialty (in New York State, at any rate) mean by "recognition": compulsory consultations at the hospital level, where such consultations can be enforced. And we could have predicted the internists' definition of a qualified consultant: a certified internist!

Such tactics don't sit well with those of us who feel that recognition should be earned, not compelled.

J. L. Bordenave, M.D. Geneva, Ill.

SIRS: ... A recent issue of MEDICAL ECONOMICS contains discussions of most of the big problems facing the medical profession today: the Forand bill, galloping socialism, the doctor shortage, the high cost of medical care, the future of Blue Shield, the malpractice threat, etc. In the same issue, one article, "Internists Are Winning Higher Fees," explains in part the reason for all the other problems.

As long as selfish interests are working only for their own benefit, medicine in general is bound to be in trouble. I have the greatest sympathy for the internists. But are they really so special? I'm sure that the general practitioner's long years of study, hard work, and self-deprivation equip him to treat more than bad colds and diarrhea. Those extra years the internist puts in aren't spent in studying any realm of knowledge beyond the

Letters

comprehension of all other M.D.s.

So the internists want more money, more patients, and more prestige, do they? What they'll get -what all of us will get as long as self-interest is permitted to run riot -is socialized medicine.

M.D.'s Wife, South Carolina

A Tip on Prescriptions

Sirs: I keep a carbon copy of every prescription I write. The original goes to the patient, the copy goes into his record. Here's a recent incident that proved to me how important such a record-keeping system is:

Years ago, a patient had been put on paraldehyde-a tablespoon several times a day. After a time, he rebelled. "I'll do almost anything you ask, Doctor, but don't make me take any more of that medicine," he begged.

So I changed him to another medication and asked him to leave the prescription bottle with me. I took one whiff and my suspicions were confirmed. The bottle contained not paraldehyde-but formaldehyde!

When I told the druggist what had happened, he started to give me an argument. But he quieted down as soon as I produced my carbon copy of the original prescription. Fortunately for everyone, no permanent harm was caused by the mix-up.

> Stephen J. Donovan, M.D. Hollywood, Fla.

Incomplete Records

SIRS: Dr. Frances M. Love says that ever since she joined her hospital's records committee, her M.D.-friends will barely speak to her. They're allegedly irritated because she tactfully suggests that they try to find time to fill out their incomplete records.

What Dr. Love seems to have overlooked is that she needn't act like a policewoman. It's the committee's job to make the rules. But it's the job of the lay employes in the record room to see that the rules are obeyed. Thus, medical personalities need never clash.

> Irving M. Levitas, M.D. Westwood, N.J.

House Officers' Pay

SIRS: A recent article points out that many house staffers feel that they're being short-changed. They're quoted as saying they're "treated like slave-labor," that they "get very little out of the work."

Why do these men take interneships or residencies in the first place? Isn't it solely to make more money later on? One wonders why

Continued on page 21

an

ho

der

W

pos

day

fer

Po

an Be wh

eff ine





answers best the question of how to treat patients with allergic dermatoses.

When you prescribe POLANII. (composed of POLARAMINE®, today's lowest-dosage antihistamine, plus DERONIL®, today's lowest-dosage corticosteroid), you can control the discomfort of allergic dermatoses, hay fever and seasonal asthma. (Remember, too, POLARAMINE alone or in combination controls the discomfort of seasonal and nonseasonal allergies, allergic complications of respiratory illness, and drug and serum reactions.)

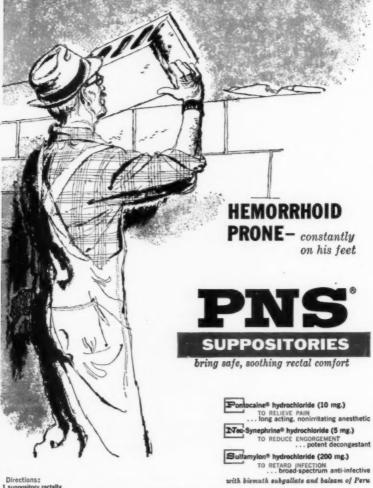
Because of its unique composition, POLANIL is particularly recommended for those dermatoses in which an antihistamine alone may not be fully effective, or for which full steroid therapy is not indicated. Pruritus responds favorably to POLANIL in almost all cases even when edema and erythema may persist.

POLANIL is effective in treating patients with resistant allergic dermatoses and seasonal asthma because the

POLARAMINE component blocks the reception of histamine in precisely those areas where histamine is concentrated and where it provokes the most intense reaction: the skin, the upper gastrointestinal tract and the respiratory tree. The DERONIL component possesses an intensified antiinflammatory activity with minimal effect on electrolyte and water balance.

Dosage: One or two tablets after meals and at bedtime. Dosage should be gradually reduced to lowest effective maintenance level or, if possible, discontinued.

Supply: Available in bottles of 50. Each tablet contains 0.25 mg. dexamethasone, 2 mg. dexchlorpheniramine maleate, and 75 mg. ascorbic acid.



Directions:
1 suppository rectally after each bowel movement and on retiring. How Supplied:
Boxes of 12.

As an added measure to promote ractal comfort while correcting bowel atonicity, add MUCILOSE-SUPER to the patient's diet. This tubricating, nonirritating bulk taxative and stool softener will encourage ossy, regular evacuation.

IS, Pontocaine (brand of tetracaine), Neo-Synephrine round of phonylephrine), Sulfamylon (brand of male-



they're not willing to work for what they'll get later on.

G. L. Moench, M.D. New York, N.Y.

On Therapeutic Abortion

SIRS: Dr. Jerome M. Kummer's recent article "Don't Shy Away From Therapeutic Abortion" is technically correct. But in this tricky field, you have to know the music as well as the words.

For instance, Dr. Kummer vrites: "The applied law is for the most part being upheld." By "applied law" he means that, in actual practice, the doctor who does an abortion for medically sound rea-

Letters

sons isn't generally charged with a crime—even if the woman's life wasn't at stake. But the phrase "for the most part" is the stinger.

Suppose that, in seventy-five out of one hundred cases, the "applied law" is upheld. Dr. Kummer is right, isn't he? Yet if you were one of the twenty-five who lost his license and went to jail, you'd never again rely on anything's being all right "for the most part."

M.D., California

in diabetic therapy, the patient should be taught to make "...day-to-day adjustments in the regimen on the basis of serial urine tests."

Danowski, T. S.: Diabetes Mellitus, Baltimore, Williams & Wilkins, 1957, p. 239.

color-calibrated CLINITEST®

the standardized urine-sugar test for reliable quantitative estimations



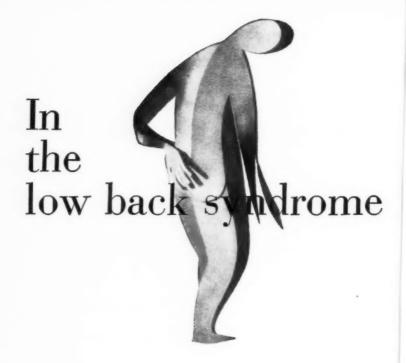


86760

MEDICAL ECONOMICS . MAY 23, 1960 2

estant

Peru



relieves both stiffness and pain with safety...sustained effect

NOTABLE SAFETY—unusually low toxicity; no known contraindications; side effects are rare; drowsiness may occur, usually at higher dosage.

RAPID ACTION-starts to act quickly.

SUSTAINED EFFECT-relief lasts up to 6 hours.

EASY TO USE—usual adult dosage is one 350 mg. tablet 3 times daily and at bedtime.



Literature and samples on request



22 MEDICAL ECONOMICS · MAY 23, 1960

anemia...
"silent
partner"
of so
many
clinical
conditions...





menorrhagia

pregnancy



geriatrics



surgery



adolescence







chronic illness

TRINSICON®

provides complete therapy for all treatable anemias

Trinsicon® (hematinic concentrate with intrinsic factor, Lilly)

ELI LILLY AND COMPANY . INDIANAPOLIS 6, INDIANA, U.S.A.

019023

MEDICAL ECONOMICS - MAY 23, 1960 23

ie.



This time...ATARAXOID

IN RHEUMATOID ARTHRITIS

Combines the established steroid, prednisolone (Sterane®) with tensioneasing hydroxyzine HCl. When anxiety impedes clinical response, ATARAXOID offers superior control—often at lower steroid dosage in the case of certain rheumatic disorders—and without unexpected side effects.

also indicated in bronchial asthma and inflammatory/allergic dermatoses

ATARAXOID provides 10 mg. hydroxyzine HCI with various potencies of prednisolone per tablet: ATARAXOID 5.0 scored, green tablets, 5 mg. ATARAXOID 2.5 scored, blue tablets, 2.5 mg. ATARAXOID 1.0 scored, orchid tablets, 1 mg.

Professional Information Available on Request

PFIZER LABORATORIES Division, Chas. Pfizer & Co., Inc. Brooklyn 6, New York Pfizer Science for the world's well-beingth

24 MEDICAL ECONOMICS - MAY 23, 1960

B-D YALE

STERILE DISPOSABLE NEEDLES

for the benefits of disposability...

PLUS



EASY-ENTRY POINTS smooth, drag-free penetration

SAFER-HANDLING HUBS surer finger grasp

TAMPER-PROOF PACKAGES assured one-time use

FULL-PROTECTION SHEATHS

in the package—after filling to the moment of injection

now in sizes to meet most parenteral needs manufactured, sterilized and controlled by

BECTON, DICKINSON AND COMPANY - RUTHERFORD, NEW JERSEY

In Canada: BECTON, DICKINSON & CO., CANADA, LTB., TORONTO 10, ONTARIO

B-D DISCA

B.D. YALE, LUER-LOK, MULTIFIT AND DISCARDIT ARE TRADEMARKS OF BECTON, DICKINSON AND COMPANY



Past tense

For the first time in months, this dad really feels like joining in the family fun. In the past, he had been far too tense either to devote a casual hour to usual father-son diversions or to answer the host of questions invariably posed by an inquisitive youngster.

He actually enjoys helping junior build a model plane, because he "feels good" and is genuinely interested. The reason: Levanil does not isolate or insulate, as many tranquilizers do. for equanimity without somnolence

Levanil
Trademark, Reg. U. S. Pat. Off.—
brand of ectylurea, Upjohn

THE UPJOHN COMPANY, KALAMAZOO, MICHIGAN



ῶ θεοί, ἄρ' οὐκ ἔστιν οὐδὲν ὥστε παῦσαι ταύτην τὴν κνῆσιν;

(Is there nothing to relieve my itching!)

Even the conqueror of the known world—Alexander the Great—could not conquer an itch. All he could do was scratch.

Today the scratching treatment may be considered ancient history because of 'Temaril'—the specific oral antipruritic, which relieves both mild and severe itching, whether acute or chronic.

SMITH KLINE & FRENCH

Temaril[®]

brand of trimeprazine (as the tartrate)

Spansule® capsules • tablets • syrup



MEDICAL ECONOMICS · MAY 23, 1960 27



CASE HISTORY

White male, age 57. Ischemic ulcers on dorsum and second toe of left foot, arteriosclerotic heart disease with congestive failure, and pneumonitis. General condition improved with bed rest, salt restriction, digitalis, and diuretics. No improvement of ulcers despite conventional peripheral vasodilators. Amputation of foot was contemplated.

With CYCLOSPASMOL, 200 mg. q.i.d., marked improvement in ulcer crater with appearance of granulation tissue within 3 weeks. No effect on toe, which was amputated. Continued therapy with CYCLOSPASMOL land prophylactic antibiotic dressings) produced smooth healing. Report and photographs courtesy

I.M. Alpher, M.D., Washington, D.C.

CYCLOSPASMO

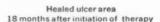


- Musculotropic¹—acts directly on the arterial wall to increase blood flow
- Indicated in both occlusive and vasospastic disorders
- Increases walking tolerance
- Relieves pain in extremities
- Promotes healing of leg ulcers
- Restores color and warmth to extremities

Literature and professional samples available on request.

1. Council on Drugs, New and Non-official Drugs, J.A.M.A. 170:1670 (Aug. 1) 1959.

*Trademark







IVES-CAMERON COMPANY New York 16, N.Y.

News

'M.D.s Need More Control Over Collection Agencies'

Do physicians have enough control over the tactics used by collection agencies they hire? One medical leader thinks not. It takes just one bad collection agency to give the whole profession a black eye, warns Dr. Payson B. Ayres, past president of the Fairfield County (Conn.) Medical Association.

Here's what prompted his comments:

A Connecticut collection agency took over a delinquent account

from a doctor and then tried to collect half again as much as the original bill. The patient complained to the Fairfield County society. Dr. Ayres and others quickly agreed



Ayres

that there was no justification for adding to the bill.

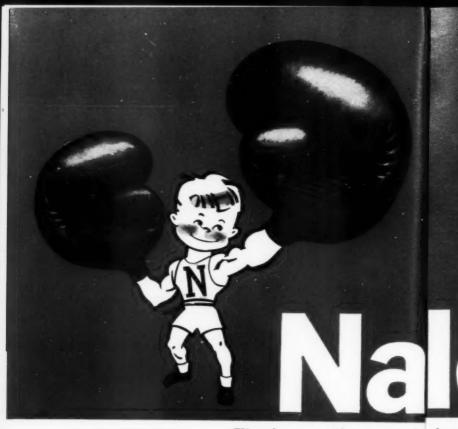
Despite the fact that the doctor involved "was unaware of this increase added by the agency," says Dr. Ayres, "ignorance is no excuse ... We must acknowledge that we, as creditors, initiate the action which makes such situations possible." And it's the doctors' public relations that suffer, not those of collection agencies, he adds.

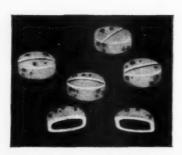
How can doctors make sure that this doesn't happen? They should have their medical societies operate their own credit and collection agencies, says Dr. Avres. This is a project that Fairfield County doctors have been considering for some time. Now, he says, this unpleasant incident may spur them into "constructive action."

Emergency-Room Service Has Its Legal Hazards

Many medical communities ask their doctors to volunteer for emergency-room duty even if they don't normally handle bodily injury cases. Such communities may be asking too much, warns Lester P. Dodd, legal counsel for the Michigan State Medical Society. Specialists may be legally vulnerable if they volunteer to do work for which they're not qualified-and if something then goes wrong.

In a situation like this, specialists are much more vulnerable than Continued on page 32





The long-acting nasal

Superior relief of nasal stuffiness due to sinusitis, through a unique "counterbalanced" formula of four ingredients—two decongestants and two antihistaminics. Round-the-clock benefits on only three tablets a day.

BRISTOL LABORATORIES, Syracuse, N. Y.

dec

Eac

0

Phe Phe

Phe

SUP

By ORAL administration

"knock the stuffings" out of nasal stuffiness

due to sinusitis-with

decon

decongestant with the therapeutic "one-two"

Each long-acting NALDECON "tablet-within-a-tablet" contains:

DECONGESTANTS:	Outer Layer (3 to 4 hours relief)	(additional 3 to 4 hours relief)	Total Content (6 to 8 hours relief)
Phenylephrine HCI Phenylpropanolamine HCI ANTIHISTAMINICS:		5 mg. 20 mg.	10 mg. 40 mg.
Phenyltoloxamine citrate		7.5 mg. 2.5 mg.	15 mg. 5 mg.

Each teaspoonful (5 cc.) of NALDECON Syrup contains the equivalent of one-half a NALDECON Tablet,

SUPPLY: Tablets, scored, bottles of 50. Syrup, prescription bottles of 16 oz.

al

News-

when giving aid at an accident scene, Attorney Dodd points out. For instance, suppose that "a physician who specializes in radiology or ophthalmology...were to come across a seriously injured person on the highway... It would rather obviously be not only his right but his duty to do the best that he could under the circumstances... He would incur no legal liability in so doing."

But if he took "charge of such a case voluntarily and when a fully qualified man was available, he would, in my judgment, render himself legally vulnerable," the attorney concludes. Therefore a doctor is justified in volunteering for emergency cases only if he feels that "he possesses the average skill and training of those practicing in his community who customarily handle such cases."

Court Assures Medical Men They're Not Storekeepers

"The office of a doctor is a place where a service is rendered. [So] it is a store like other stores which render service."

That's how one New York judge viewed a doctor's office a year ago when he ruled on a rent-control case. Now, in two subsequent decisions, the courts have concluded that the doctor's office isn't a store and shouldn't be deprived of the protection of the state's rent-control laws.

Here are the two cases that have kept New York City doctors in a quandary:

A landlord sought to have the street-level office of Dr. Paul W. Lapidus, an orthopedic surgeon, declared a store. This would have permitted the landlord to raise the rent. The lower court ruled against Dr. Lapidus. So he appealed.

While Dr. Lapidus was awaiting a new ruling, the same court that had ruled against him was called on to hand down a decision in a similar case. This time the court ruled in favor of Dr. Milton Reder, an otolaryngologist. Judge Maxwell Shapiro explained his decision this way:

"To an ordinary person, a doctor's office is not a store, whether the office is at street level or elsewhere. The basic character of a store is a place where people shop—the kind of place where the general public is invited to buy goods or services... It is difficult to conceive of a doctor's office... as a place where people shop for medical treatment."

These two conflicting views were resolved when the Appellate Division of the state's Supreme Court came to Dr. Lapidus' rescue.

Continued on page 37

Us

3u1 200

26.22.2



proven effective and outstandingly safe

- · simple dosage schedule produces rapid, predictable tranquilization without unexpected excitation
- · no cumulative effects, thus no need for difficult dosage readjustments
- · does not produce ataxia, change in appetite or libido
- · no danger of hypotension, depression, Parkinsonlike reactions, jaundice or agranulocytosis
- · does not impair mental efficiency or normal behavior

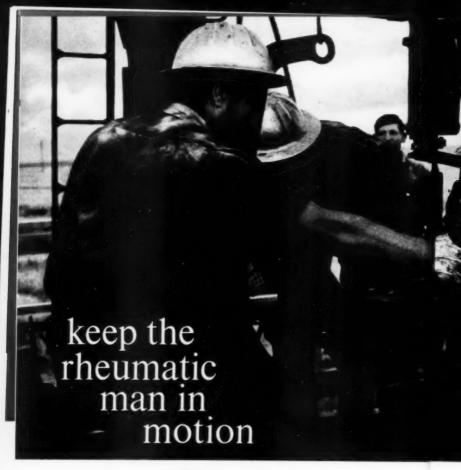
Usual dosage: One or two 400 mg. tablets t.i.d. Supplied: 400 mg. scored tablets, 200 mg. sugar-coated tablets; or as MEPROTABS*-400 mg. unmarked, coated tablets.

Milto

CM-1954



WALLACE LABORATORIES New Branswick, N. J.



new Delenar

for the first time... total corticoid-relaxant-analgesic therapy

Schering



keep a bi

a bi mot arth fibro form Dexa

Orpho Alum Dosa contir and Cobser

XUM



Now you can resolve musculoskeletal inflammation rapidly with the newest steroid . . . relax the attendant spasm with a proved muscle relaxant . . . and relieve the pain with a safe, inherently buffered analgesic . . . to keep the rheumatic man in motion • With new Delenar you can resolve a broad range of rheumatic complaints. You can maintain the man in motion safely with the lower steroid dosage of Delenar, in rheumatoid arthritis – traumatic arthritis – low-back complaints – fibrositis – chronic fibromyositis—rheumatoid spondylitis—tendinitis—and early osteoarthritis.

formula			
Dexamethasone*	0.15	mg.	
Orphenadrine HCI	15	mg.	
Aluminum Aspirin		mg.	

therapeutic actions

Newest Steroid for Anti-inflammatory Action Proved Muscle Relaxant, Helps Restore Motion Fast Analgesic Relief of Motion-Stopping Pain

Dosage: Two tablets q.i.d.; after improvement is obtained, gradually reduce dosage, and discontinue where possible, Packaging: Delenar Tablets, bottles of 100 and 1,000. Precautions and Contraindications: Because Delenar Tablets contain dexamethasone, the precautions observed with this corticoid apply to their use. Schenar Composations in government. New Heart

DERONIL IM H-211





Now you can treat the underlying cause of many imaginary ills

When ills turn out to be imaginary, depression usually is the cause of annoying symptoms. In many such instances, NIAMID can raise the patient's spirits, free her from the doldrums of imaginary disease, and renew her interest in friends and family.

NIAMID treats the underlying cause of many depressive syndromes, occurring alone or complicating a physical disorder. This effect appears to be achieved by restoring neurohormone balance. Response to the gradual, gentle action of NIAMID begins within a few days in some patients, and in most other patients within two or three weeks.

NIAMID is an exceptionally well tolerated antidepressant-more than 500,000 prescriptions in many clinical conditions-more than 90 published papers.

NIAMID is supplied as 25 and 100 mg. scored tablets. A Professional Information Booklet is available on request from the Medical Department, Pfizer Laboratories, Div., Chas. Pfizer & Co., Inc., Brooklyn 6, New York.



Plizer Science for the world's well-being TM

Judge Martin M. Frank issued the higher court's opinion:

"We cannot accept a general definition that classifies members of the learned profession of medicine as engaging in the sale of personal property or the rendition of services in the ordinary course of business.

"Were we to conclude that doctors' offices on street level are subject to decontrol because they are stores, we would subject that class of tenants to unconscionable demands for exorbitant rents under penalty of eviction."

Teaching Staff Wins Higher Retirement Age

Staff doctors at one hospital recently found themselves in an awkward retirement tangle. A near-by medical college allowed them to teach until they were 70 years old. Yet the hospital affiliated with the college turned them out to pasture when they reached 63.

To get out of this tangle, some of the doctors proposed an amendment to the hospital's by-laws. Their aim: to have the retirement age of the Receiving Hospital of Detroit moved up to 70. If this were done, the age limit would then conform to that of the Wayne State University College of Medicine, also in Detroit, where all members of the hospital staff are faculty members.

- News

A few of the staff doctors preferred the 63 retirement age. They argued that the higher age would encourage older teachers to linger on as staff doctors when they were often undesirable. But the opposition fired back:

"It's ridiculous to believe that one day a person is fully competent to do a job and then on the following day he becomes a year older and is no longer competent to do it." As far as the opponents were concerned, compulsory retirement at 63 was filled with "shameful inequities."

When the question came up for a vote, the 70-year retirement age received the enthusiastic support of the hospital staff physicians. Final count: Ninety-three favored the higher limit; only twelve opposed it.

Rule Requiring Two Surgeons Is Scored by M.D.s

Most authorities agree that it's desirable to have two surgeons on hand for major surgical operations. But should a state make this compulsory in all such cases? In one state where such a regulation has been passed, the answer from medical men seems to be a most emphatic "No!"

Continued on page 40

Your surgical convalescent feels better because he is better with

Durabd

(Nan



38 MEDICAL ECONOMICS ' MAY 23, 1960



1 CC. for safe potent anabolic stimulation

+ to maintain positive nitrogen balance

once

+ to promote rapid wound healing + to restore appetite, strength, vitality

each

+ to create a sustained sense of well-being

 \pm to shorten convalescence, save nursing time

week + to reduce the cost of recovery

A single 1-cc. injection of Durabolin each week will help your surgical convalescent return to full-time activity sooner. By creating a positive nitrogen balance, Durabolin® promotes rapid wound healing. Outlook, strength and vitality improve, often dramatically. The patient feels better because he is better. In the hospital, Durabolin therapy (1 cc. once each week) costs far less than oral anabolic therapy and saves valuable nursing time. Administered in your office, Durabolin not only insures your direct therapeutic control, but eliminates the chance of forgotten doses and the possibility of unfilled, costly prescriptions.

Supplied: 1-cc. ampuls (box of three) and 5-cc. vials, 25 mg, nandrolone phenpropionate/cc. Adults: 1 cc. intramuscularly each week, or 2 cc. every other week.



ORGANON INC., W. Orange, N. J.

News-

The regulation came about like this:

Just a year ago, the Nebraska State Medical Association decided to look into the problem of solo surgery in that state. Its hospital council committee proceeded to work out a new regulation with the State Board of Health. Main provision: "When major surgery is performed, there shall be not less than two physicians scrubbed, one to assist the other."

As soon as the Board of Health approved the regulation, doctors

began to object. Some said they knew nothing of the public hearings on the regulation. Others said the first they heard of it was through a local newspaper. Their biggest question: What's going to happen if a doctor in a small hospital has to operate without waiting until he can find someone to help?

Dr. D. E. Baca of Papillion, Neb., is one of the doctors worried about that question. Here's the way this 46-year-old surgeon sees it:

1. "The rule could be a real come-on for every shyster lawyer in the state." Reason: If a doctor in a rural area had to operate with-

Everything under control...including the temperature with

Tylenol first liquid pediatric

first liquid pediatric antipyretic analgesic

Tylenol® Acetaminopher brings fever and pain under control quickly, safely . . . we liked by children.

Tylenol Elixir—120 mg. per 5 cc. Tylenol Drops—60 mg. per 0.6 cc.



McNEIL LABORATORIES, IN Philadelphia 32, Pa.



anticholinergic KEEPS THE STOMACH FREE OF PAIN

tranquilizer KEEPS THE MIND OFF THE STOMACH



Milpath acts quickly to suppress hypermotility, hypersecretion, pain and spasm, and to allay anxiety and tension with minimal side effects.

AVAILABLE

IN TWO POTENCIES: Milpath-400 - Yellow, scored tablets of 400 mg. Miltown (meprobamate) and 25 mg. tridihexethyl chloride. Bottle of 50. Dosage: 1 tablet t.i.d. at mealtime and 2 at bedtime.

Milpath-200 - Yellow, coated tablets of 200 mg. Miltown (meprobamate) and 25 mg. tridihexethyl chloride. Bottle of 50.

Dosage: 1 or 2 tablets t.i.d. at mealtime and 2 at bedtime.

Miltown +anticholinergic

WALLACE LABORATORIES New Brunswick, N. J.



r 5 cc. 0.6 cc ES, IN

nev аг-

aid vas

eir 10 OSait-

to

on,

ied vay

real yer

tor ith-

he

rith

ic

inopher

n und

News

out an assistant, he'd have a tough time defending himself in a malpractice suit. He'd be in direct violation of a state regulation.

The rule may make patients complain about increased surgical costs. Their complaints won't do medicine any good in its fight against Federal intervention.

Because of such criticisms of the regulation, the state may eventually repeal it. But repeal is unlikely before the rule goes into effect on July 1.

As Welfare State Grows, So Does Suicide Rate

The welfare state has been blamed for bringing about a variety of evils. Now it's being blamed for raising the suicide rate in Sweden.

The suicide rate in "the most highly developed of the world's welfare states" is climbing alarmingly, notes U.S. News & World Report. In Sweden today:

A mother "receives free services of a trained midwife before, during, and after the birth of her child. She gets hospital care during confinement at no cost. Prenatal clinics provide free examination and consultation."

Children "receive free health supervision up to school age in national child-welfare centers, and, during school years, from school doctors and nurses."

¶ Diabetics "pay nothing for insulin. For other prescribed medicines there is a discount of 50 per cent if the cost is over 60 cents. [And] the State pays costs of vitamins and inoculation against disease."

Is the country healthy? Physically, perhaps, but social ills are increasing, reports the magazine. Robberies and burglaries have doubled in the last ten years. Juvenile delinquency and arrests for drunkenness have tripled. And suicides have increased sharply. Now, according to the magazine, some Swedish psychiatrists have suggested the reason:

"Many suicides are committed over marital or other emotional problems, because the welfare state has provided such extensive cushioning that some people just cannot face up to personal emergencies."

Doctor's Safe When Patient Signs a General Release

Suppose an injured patient signs a general release for the person who's liable for her injury. Can she then sue her doctor for malpractice because he allegedly aggravated the injury?

No, according to a recent ruling by a New York State court. By Continued on page 46 b

e

0

a

n

n

W

u

a

n

new and unique

tetracycline therapy/new antifungal protection in better-tasting aqueous forms

New Mysteclin-F provides without coaxing. Your very antifungal protection plus antimicrobial efficacy. Its outstanding antifungal agent, Fungizone, successfully forestalls monilial overgrowth. Its broad spectrum tetracycline base brings unsurpassed antibiotic pressure to

bear against a wide variety of bacterial infections. Thus, even when high or prolonged dosage is required, new Mysteclin-F may be prescribed with confidence. New Mysteclin-F,

nystatin, has the added for syrup ated tetracycline [HCl advantage of a pleasing, mixed fruit flavor. It is certain amphoteric in B Squibb

to win patient cooperation [Fungizone] per cc.). Squibb Quality - the

young patients, so susceptible to fungal superinfections, are foremost candidates for the convenient syrup or drop form of new Mysteclin-F especially designed for children.

Supplied: Mysteclin-F For Syrup (125 mg. phosphate-potentiated tetracycline [HCl equivalent] and 25 mg. amphotericin B [Fungizone] per 5 cc. teaspoonful). Mysteclin-F For Aqueous Drops (100 mg. unlike bitter-tasting for aqueous drops phosphate-potentiequivalent] and 20 mg.

ool

indiper

its. talis-

si-

are

ne.

ive

ve-

for

nd ly.

ne.

ive

led

nal

ate

sh-

in-

en-

Ť

s a

on an

al-

ag-

ng By 46

the pleasure of a little real salt

(little pleasures can become big ones in edema and hypertension)

An egg without salt? A small privation, perhaps—but typical of the many "small privations" the edema or heart patient can face every day.

This is where a good diuretic like Oretic can help out. Potent enough to treat the more serious aspects of edema, and valuable in management of mild to moderate hypertension, Oretic produces a marked elimination of water and sodium.

And the saluretic effect is what may also let you liberalize meal-planning by loosening up a little on sodium restrictions.

Not in every patient, of course. But in enough cases to make it worth trying. If a rigid low-sodium diet isn't absolutely necessary, one thing is sure: your patient will thank you for putting the small but real pleasure of real salt back in his regime.

ORETIC[®]

(Hydrochlorothiazide, Abbott

a potent means when the end is saluresis. Tablets, 25- and 50-mg.





News-

signing the general release, the patient also frees the physician and the hospital from liability. Justice Arthur G. Klein has ruled. Here's the case on which he based that decision:

A patient fell down a flight of stairs in an apartment building and injured her spine. She was operated on at the hospital by an attending physician. Later a resident who removed sutures allegedly left a small piece of silk suture in the patient, resulting in an infection.

The patient sued her landlord for negligence and collected. But, to collect, she had to sign a general release indicating that she'd recovered fully from her injuries.

The patient then trained her guns on the hospital and the resident. She asked \$50,000 because they'd "aggravated the damage" caused by her fall. The infection she'd suffered had also prolonged her recovery and stay in the hospital, she contended.

But the hospital and the physician moved to dismiss the suit. They argued that, when the patient signed the general release, she freed all parties concerned from liability. The Court agreed.

"A wrongdoer is liable for the ultimate result [even] though the mistake or even negligence of the physician who treated the injury may have increased the damage which would otherwise have followed from the original wrong," ruled Justice Klein.

Caveat: If any patient signs a release that reserves his rights against all others, he *does* have the right to bring subsequent action for aggravation of his injuries, say medicolegal authorities. Hospitals and physicians in such cases could then be held liable.

Psychology Is Used to Make Deadbeats Pay Their Bills

The rough, tough bill collection methods sometimes used by collection agencies may not be appropriate for use by doctors themselves. But doctors may learn something about ways to handle delinquent patients from an agency man who has made a special study of debtor psychology.

When Psychologist Eugene H. Barnes was hired by a collection agency two years ago, he quickly learned the dodges debtors were using to elude the agency's collectors.

"I'd say our business deals with about 2 per cent of the population," he relates in a Saturday Evening Post article. "The other 98 would be surprised at the lengths to which debtors will go just to avoid paying us. They change their names. They teach their children

BIPHETAMINE

A 'STRASIONIC' RELEASE ANORETIC

RESIN

FOR THE "SEDENTARY" OVEREATER..

BIPHETAMINE '20'

(20 mg.)

BIPHETAMINE '121/2'

e

1-

a

ne

n

IV

Is

ld

e

on c-

omrn lle cy dy H.

re c-

th la-

e-98

hs

to

en

BIPHETAMINE '7%'

(7 5 mg)

Each capsule of each strength contains equal parts of d-amphetamine and dl-amphetamine as cation exchange resin complexes of sulfonated polystyrene.



Single Capsule Daily Dose 10 to 14 hours before retiring

predictable weight lossing

IONAMIN

FOR THE "ACTIVE" OVEREATER.

OE' NIMANO!

IONAMIN'IS'

(30 mg.)

(15 mg.)

Each capsule of each strength contains phenyl-tert.-butylamine as a cation exchange resin complex of sulfonated polystyrene.



Single Capsule Daily Dose 10 to 14 hours before retiring

STRASENBURGH

News

to lie about the parents' whereabouts. They drop friends and relatives and leave town. They impersonate their bosses on the telephone. They join the Army. They switch to lower-paying civil-service jobs where their salaries cannot be attached." Adds the psychologist:

"Frankly, I feel we're dealing with lemon peels. Our average debtor owes a total of \$1,900 in various bills. How much we can squeeze out of him depends in part on how many other creditors got there first. But when we apply psy-

chologically sound pressures, we find we can wring some money out of almost anyone."

a

all

0

3.

bus

the.

Dr. Barnes' first money-wringing technique involves a barrage of letters. He mails a debtor one every five days "to approximate the techniques of the Spanish Inquisition, when the torturers made drops of water drip-drip-drip on the foreheads of their victims. It's the cumulative effect that melts resistance." One series of letters reads in part like this:

1. "This account has been placed with us for immediate collection... If full payment is received in this office by return mail, this account



aches and pains and muscle strains relieved with

DAPRISAL®

'Daprisal' therapy offers more than simple analgesia. Your patients also benefit from the mood-lifting Dexamyl* content (dextro amphetamine and amobarbital) that gives a gentle lift, helps them "keep on the go."

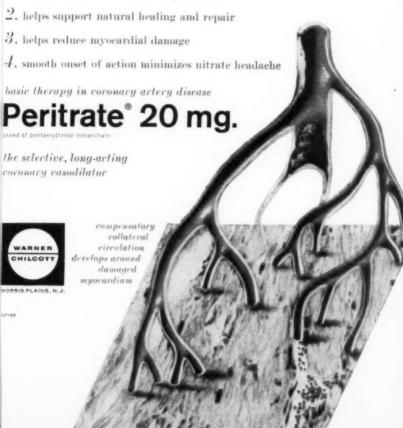
> SMITH KLINE & FRENCH

> > XUM

after a myocardial infarction and throughout the course of postcoronary convalescence...

Peritrate helps <u>establish</u> and sustain collateral circulation

 improves coronary blood flow with no significant drop in blood pressure or increase in pulse rate



ui

ng et-

ch-

of rem-

e."

art

ced

his

unt

15

th

ore

pa-

the

ent

nd tle o."

News

will not be placed with your local credit bureau."

"Continued delay will jeopardize your credit standing and may compel us to use more drastic measures."

3. "WHAT IS THE MATTER??? We cannot believe that you would risk censure for this sum of money. Take care of this matter today and spare yourself unpleasantness."

When debtors aren't shocked enough by these letters to respond, Dr. Barnes uses the telephone. Many debtors are permanently "out" when he calls. So he tries to persuade them to call him instead—with curiosity stimulators like the "page-two letter." This sheet of paper is marked "page two", at the top and starts off:

"and I am sure you realize we did not wish to do this. However, if you get in touch with us today, we may be able to help. Our phone number is . . ."

"This suggests that we accidentally forgot to send along a 'page one' containing word of something unpleasant that is about to occur, but can still be stopped," explains the psychologist. But, he adds, such devices occasionally backfire "because some 80 per cent of our accounts are repeaters, and they adjust all too rapidly to our ways. Just recently I got a letter from one wiseacre who marked his note 'page three' and started out:

'most assiduously, so you can see you left me no choice. Your situation may not be entirely hopeless, however, if you will contact me...'"

On the whole, though, Dr. Barnes' techniques must be effective because they've enabled his employer, National Accounts System, Inc., of Chicago, to top what he says is the national agency average of 55 per cent of bills collected from debtors who can be located. His firm manages to collect 79 per cent.

For this service, the agency charges one-third of what it collects. If an account is very small or old, or involves "skips"—debtors who purposely disappear—the agency gets a full one-half.

British Offer Special Aid To Visiting Colleagues

Doctors who may be planning vacations in Great Britain can now get personal assistance from their British colleagues in advance. An International Medical Advisory Bureau has been set up by the British Medical Association to assist physicians who visit that country. The bureau will:

¶ Arrange for visits to hospitals and clinics and provide the latest Continued on page 54

Schering Trilafon for the anxiety in the person overwhelmed by family illness...selective anxiety relief with minimal drowsiness or dulling



XUM

ne

te

an ur ly ill

r. ecnis VSat -15 ed ed. per cy olor ors the

vaow eir An ory



Triburon-HC WITH HYDROCORTISONE

microbicidal · anti-inflammatory · antipruritic

Triburon

unique topical microbicide

not an antibiotic - not a nitrofuran

CONSISTENT RESPONSE IN SKIN INFECTIONS

REGARDLESS OF VIRULENCE, RESISTANCE, CHRONICITY

A DISTINCTIVE ANTIMICROBIAL, TRIBURON PREVAILS OVER PRIMARY AND SECONDARY INVADERS PROMPTLY, SAFELY, WITH NO SIGNIFICANT LOSS OF ORGANISM SENSITIVITY. TWO FORMS: TRIBURON FOR SKIN AND WOUND INFECTIONS, TRIBU-RON-HC (WITH HYDROCORTISONE) TO COUNTER ITCHING AND INFLAMMATION AS WELL AS INFECTION, BOTH HAVE ACHIEVED IMPRESSIVE CLINICAL RECORDS: EFFECTIVE IN OVER 90% OF PATIENTS 2-5 DRAMATIC RESPONSES IN CHRONIC CONDITIONS4.0 MICROBICIDAL EVEN AGAINST RESISTANT STRAINS OF STAPH, AND STREP.1,4 VIRTUALLY NON-SENSITIZING AND NONIRRITATING2-6 STAINLESS, ODOR-LESS, "HIGHLY ACCEPTABLE"5.

EFFECTIVE THERAPY FOR: IMPETIGO, FOLLICULITIS, FURUN-CULOSIS, ECTHYMA, ECZEMA, ACNE, ATOPIC DERMATITIS, NEURODERMATITIS, CONTACT DERMATITIS, STASIS ULCERS, MYDRADENITIS, SEBORRHEIC DERMATITIS, INFECTIOUS ECZEMA-TOUS DERMATITIS. WOUNDS AND LACERATIONS.

TRIBURON-FOR ALL SKIN AND WOUND INFECTIONS RECUIRING CONSISTENT ANTIBACTERIAL ACTION, AND FOR PREVENTION AND TREATMENT OF POST-SURN INFECTIONS. (TRIBURON-IMPREGNATED DRESSINGS CAN BE AUTOCLAVED.)

AVAILABLE: CONTMENT, CONTAINING 0.1 PER CENT TRIBURON CHLORIDE, IN 1-OZ TUBES AND 1-LB JARS.

TRIBURON-HC-FOR INFLAMMATORY AND ECZEMATOJO DERMATOSES WHERE ANTI-INFLAMMATORY AND ANTIPRURITIC BENEFITS AS WELL AS ANTIBACTERIAL EFFECTS ARE REQUIRED.

AVAILABLE: OINTMENT, CONTAINING 0.1 PER CENT TRIBURON CHLORIDE PLUS 0.5 PER CENT HYDRO-CORTISONE, IN 5-GM AND 20-GM TUBES.

REFERENCES: 1. R. J. SCHNITZER, E. GRUNBERG, W. F. DELORENZO AND R. E. BAGDON, ANTIBIOTICS & CHEMOTHER, 9:267, 1950. 2. R. C. V. ROBINSON, ANN. PEW YORK ACAD. SC., 82(ART. 1), 144, 1959. 2. E. EDELSON, E. GRUNBERG, A. D. CALABRESE AND T. V. MORTON, 1810., P. 124. 4. P. L. WILLIAMS, 1810., P. 136. 6. F. T. BECKER AND J. L. TUURA, 1810., P. 131. 6. S. M. BLUEFARB, 1810., P. 119.

TRIBUPON® CHLORIDE - N,N'-BIS[1-METHYL-3-(2,2,6-TRIMETHYLCYCLOHEXYL) PROPYL]-N,N'-DIMETHYL-1,6-NEX-AHEDIAMINE BIS (METHOCHLORIDE)



ROCHE LABORATORIES - DIVISION OF HOFFMANN-LA ROCHE INC - NUTLEY 10, N. J.

News-

information about post-graduate courses;

¶ Help find suitable hotel and lodging accommodations;

Provide general information on cars, sports, traveling, exhibitions, theatres, and other topics.

To get advance information, doctors can write to the bureau's medical director, Tavistock Square, London, W.C. 1, England.

This Trust Fund Makes Money for Doctor's Widow

A physician with a high income can now save money by giving it away. Even better, he can continue to save money for his widow or other beneficiary through the so-called Johns Hopkins plan. All the physician has to do first is to find a hospital or charity willing to accept his contribution as a trust.

The Johns Hopkins University and Hospital, Baltimore, Md., has pioneered in seeking such donors. Other hospitals and charities have picked up the idea. Briefly, it works this way:

The physician contributes securities, real estate, or other property to the hospital or charity of his choice. The charity then sells the property at its current value and without incurring any tax on the proceeds. The charity deposits the proceeds in a trust fund and names the physician as the lifetime beneficiary of the trust's income. The trust fund is invested only in tax-exempt securities, such as municipal bonds.

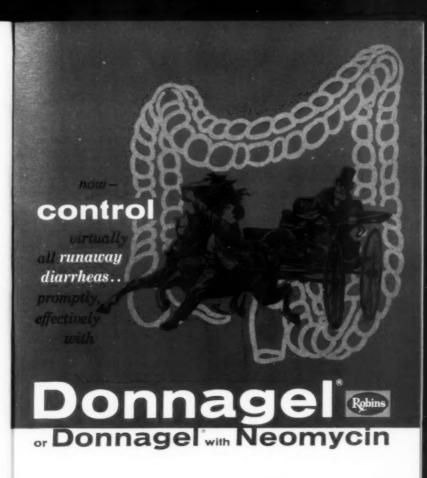
Under the Johns Hopkins plan, the physician can even name a beneficiary to receive the trust's income after his death. One limitation: The beneficiary must be at least 40 years old.

What's the real advantage for the doctor? Consider the case of a 55-year-old G.P. who donates property worth \$40,000 to a hospital. The doctor gets an immediate tax deduction for the value of the property. He then receives \$1,600 each year in tax-free income from proceeds of the municipal bonds the trust has invested in. If the doctor and his beneficiary live their normal life expectancies, they'll get \$54,084 from the tax-free trust in thirty-three years.

'Bigger Hospital May Be A Big Mistake'

Contrary to what some doctors and many laymen think, a bigger and better-equipped hospital isn't always desirable. The money that a hospital spends to meet competition from other institutions could often be spent in cooperating with them instead.

So says Raymond P. Sloan, associate professor of administrative



Prompt and more dependable control of virtually all diarrheas can be achieved with the comprehensive Donnagel formula, which provides adsorbent, demulcent, antispasmodic and sedative effects—with or without an antibiotic. Early re-establishment of normal bowel function is assured—for all ages, in all seasons.

DONNAGEL: In each 30 cc. (1 fl. az)-

,	ONNAGEL: In each 30 cc. (1 fl. oz.):	
	Kaolin (90 gr.) 6.0 Gr	n.
	Pectin (2 gr.) 142.8 m	g.
	Hyoscyamine sulfate 0.1037 m	g.
	Atropine sulfate 0.0194 m	g.
	Hyoscine hydrobromide 0.0065 mg	g.
	Phenobarbital (1/4 gr.) 16.2 mg	g.

DONNAGEL WITH NEOMYCIN

A. H. ROBINS CO., INC., Richmond 20, Virginia . Ethical Pharmacouticals of Merit since 1878

and ime me. / in as lan,

st's mi-

e at

of a

nosedie of ives inunisted iary

ies,

and and

al-

at a beti-

ould

vith

SSO-

tive

News-

medicine at Columbia University and a hospital trustee as well. In the magazine The Modern Hospital, he warns that greater cooperation between hospitals depends on wholesale "changes in the thinking and perspective of those responsible"—doctors, as well as trustees, administrators, and citizen groups.

As for the doctor, he'll now often "push for the inauguration of special services that he is sincerely convinced will bring renown to the hospital and at the same time reflect credit upon his own skills. [But] his pleas frequently reveal scant recognition of parallel services in adjacent institutions," asserts Professor Sloan. One result: "the presence of cobalt machines in three hospitals located within a small area." Another result: several hospitals in one community all equipped to handle brain surgery.

Before a doctor decides to ask for such parallel services, suggests the professor, he might do well to ask himself. "Is it personal prestige that influences [this decision] or is it the good of the community?"

As for laymen who are concerned with hospitals, Professor Sloan would like to see a change of perspective among several groups of them: 1. The trustee now too frequently spends money on "what Hospital X in another section of town has...rather than [on] what the community actually needs." Or he's solely concerned with perpetuating his institution rather than with the health of the community. A case in point:

Is

ol

T

T

D

D

25

of

& 3. an Ps

B

The president of one small metropolitan hospital "became highly emotional on a recent occasion over the lack of support he was receiving . . . in raising sufficient funds to add 125 beds. The hospital was founded by his father, and with tears in his eyes he declared his obligation to perpetuate the name." But Professor Sloan doubts whether such "individual thinking, planning, and working [was] for the best interest of the health care of his community."

2. The administrator now "too frequently restricts his leadership to his own institution, at the sacrifice of over-all community health." A case in point: A recent survey in one community led to recommendations that "included closing the doors of certain buildings and affiliation of others with a large neighboring institution. [This idea] elicited little enthusiasm from the administrators involved, who saw doors closing on their professional careers as well."

3. Citizen groups now too often erect or expand hospitals without

Tofrānil°

brand of imipramine HCl

in depression

lights the road to recovery

in 80 per cent of cases

In the treatment of depression Tofranil has established the remarkable record of producing remission or improvement in approximately 80 per cent of cases. 1-7

Tofranil is well tolerated in usage—is adaptable to either office or hospital practice—is administrable by either oral or intramuscular routes.

Totranil

ti-

n

e 's

e

e

-

n

S

it

-

d

e

9

a potent thymoleptic... not a MAO inhibitor. Does act effectively in all types of depression regardless of severity or chronicity.

Does not inhibit monoamine oxidase in brain or liver; produce CNS stimulation; or potentiate other drugs such as barbiturates and alcohol.

Detailed Literature Available on Request.

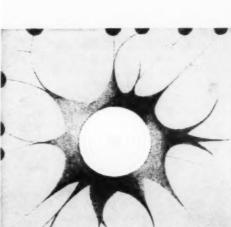
Tofranil® (brand of imipramine HCI), tablets of 25 mg., bottles of 100. Ampuls for intramuscular administration only, each containing 25 mg. in 2 ec. of solution, cartons of 10 and 50.

Reference: 1. Ayd, F.J., Jr.: Bull. School Med., Univ. Maryland 42:29, 1959. 2. Azima, H., and Vispo, R. H.: A.M.A. Arch. Neurol. & Psychiat. 81:658, 1959. 3. Lehmann, H. E.; Cahn, C. H., and de Verteuit. R. L.: Canad. Psychiat. A.J. 3:155, 1958. 4. Mann, A. M., and MacPherson, A. S.: Canad. Psychiat. A.J. 4:38, 1959. 5. Sloane, R. B.; Habib, A., and Batt, U. E.: Canad. M.A.J. 80:540, 1959. 5. Straker, M.: Canad.

Geigy, Ardsley, New York



Geigy



TO4-60

first asking, "Where are we going to get doctors and nurses?" And they too often reject "any suggestion to join forces with an already established hospital center a few miles distant." Yet, notes Professor Sloan, "the public resents rapidly rising costs, and contests the efforts of prepayment plans to increase charges."

Malpractice Award Forces Doctor Into Bankruptcy

Back in the Big Depression, insolvency was a real risk for a good many private physicians. Now the risk is back again. Case in point:

A California physician and his dentist associate recently had to file bankruptcy papers after a \$55,000 court award went against them. Their combined professional liability insurance covered only \$35,000 of the court's award. This left them owing the patient \$20,000—more than they could raise out of their current assets.

How did they get into this fix?
A few years back, the physician and the dentist bought an office building together. They set up independent practices in the building; but, for a while, the same receptionist worked for both men.

According to court records, their troubles began when the physician,

a 42-year-old G.P., referred a pyorrhea patient to the dentist. In the process of pulling the patient's teeth, the dentist left broken roots in the patient's jaw. Soon the patient developed a fever and a rash and went back to the physician for help. The physician gave him a series of injections and hospitalized him.

After his release, the patient consulted a second physician. This man discovered the broken roots that had gone unnoticed by the first M.D. So the patient sued both the dentist and the first physician for negligence, claiming that the prolonged infection and fever had permanently impaired his health.

A jury found both defendants liable and awarded the patient \$55,000. Neither defendant had sufficient insurance to cover the amount. (The physician carried \$25,000 in liability insurance; the dentist carried \$10,000.)

The physician appealed, only to have the lower court's verdict reaffirmed. The insurance firms then paid \$35,000 of the award. But the remaining \$20,000 is still unpaid, pending bankruptcy proceedings.

Both defendants own their office building jointly with their wives. But the court must decide whether the wives were owners prior to the bankruptcy.

Continued on page 62

KLI



Aircraft worker, 35, with cramping pain of three weeks' duration in lower bowel. Moderately severe diarrhea, tension and spasm complicated the picture.

Diagnosis: mucous colitis.

Patient was put on a regimen of one 'Combid' *Spansule* capsule b.i.d. and a low residue diet was prescribed. Five days later patient was completely free from symptoms and has remained so. No side effects were reported.

KLINE (7)
The patient's physician commented that this case "proves the value [of 'Combid'] in lower g.i. as well as upper g.i. distress."



Smith Kline & French Laboratories, Philadelphia

V-

ie i's

ts a-

sh

a ed nt is ts ie h n e d n. is it d

á

e

0

1

t

SMITH

DEPRESSION INDUCED ANXIETY

most commonly encountered in:

psychosomatic disorders chronic diseases other organic illnesses

most commonly expressed by:

nervousness / anorexia tension fatigue states sadness / insomnia somatic complaints apprehensiveness irritability hypochondria

most effectively treated with:

a true antidepressant which relieves the depression-induced anxiety by alleviating the depression itself

brand of phenelzine dihydrogen sulfate

a true antidepressant-not a tranquilizer

the common problem basically unresponsive to tranquilizers

TYPICAL CASE HISTORIES FROM THE LITERATURE



"A 44-year-old housewife with symptoms of anxiety referable to her heart and stomach. All examinations were negative for the presence of organic disease...she had received 4 different tranquilizers."

On Nardil "the majority of her anxiety symptoms had disappeared. Later she remarked that she was 100% better.... There has been no return of her former complaints."*

*Hobbs, L. E. Virginia Med. Monthly 86:692, 1959.



"Characteristically the patient complains of impaired appetite, insomnia, irritability, loss of attention and concentration, tendency to worry and marked irritability...treatments are usually built [in vain] around some sedative or tranquilizer....

With Nardil this condition is easily managed... by the practicing clinician. ****
**Sainz, A.: Bis. Nerv. System 20:537, 1959.

simple, economical, rapidly effective therapy





MA-GPO3

News

In addition to the office building, the two men stand to lose their automobiles, small amounts of stock, and a few other minor assets. But they'll be permitted to keep their homes under the state's bankruptcy law.

Can Hospital Trustees Fire A Staff-Approved M.D.?

What happens when the trustees of a hospital kick several doctors off the medical staff over the staff's protests? Are the trustees within their rights?

The answer is both yes and no, say the editors of the Worcester (Mass.) Medical News: Yes, because "the board of trustees has the right of appointment to the medical staff of the hospital." No, because the trustees also have "the moral obligation to follow the recommendations of the staff."

The situation that resulted in this opinion involves Worcester's Fairlawn Hospital. A new chief of surgery was recently elected by that hospital's staff and approved by its trustees. The chief then advanced some new ideas about "upgrading" the staff, according to the editors. And he reportedly accused several doctors who opposed these ideas of having "obstructed a surgical division meeting."

Meanwhile, the staff unanimously accepted the previous year's annual staff roster. But the hospital administrator reportedly struck the name of one of the "accused" doctors from the roster. In defiance of this action, the staff reconfirmed its original roster and sent it to the trustees.

What did the trustees do? According to the editors, they disregarded the roster and "substituted a personal roster" given them by the now controversial chief of surgery. Then, the trustees dropped three of the "accused" doctors from the medical staff altogether and demoted two other physicians by depriving them of their specialty privileges.

If the trustees think they were thus acting properly, the Worcester Medical News thinks otherwise. It complains editorially that "no formal charges were made against the dismissed physicians. No hearings were held. No explanations were forthcoming... Arbitration was refused."

No one questioned the fact that a board of trustees has the right to make staff appointments. But "self-government of the medical staff is lost if the board exercises that right in an arbitrary or capricious manner." continue the editors. Besides, they assert, the staff of Fairlawn Hospital has a trustee-approved by-law stating "that the

to

Rapin bacte Pseur addit 8 yea blood AVERA retirin

1957.

Just a "simple"
case of cystitis
may be the
precursor of
pyelonephritis¹—
or may actually be
the first evidence
of a pre-existing
pyelonephritic
process.²



WHEN TREATING CYSTITIS-SPECIFY

FURADANTIN

brand of nitrofurantoin

ni-

us he

lly c-

In aff

nd

C-

e-

by ir-

ed

ns ne-

ere orernat de ns.

X-

at

to

ut

cal

ses

p-

di-

aff

e-

he

FIRST

to ensure rapid control of infection throughout the urogenital system

Rapid bactericidal action against a wide range of gram-positive and gram-negative bacteria including organisms such as staphylococci, Proteus and certain strains of Pseudomonas, resistant to other agents a actively excreted by the tubule cells in addition to glomerular filtration engligible development of bacterial resistance after 8 years of extensive clinical use excellent tolerance—nontoxic to kidneys, liver and blood-forming organs safe for long-term administration

AVERAGE FURADANTIN ADULT DOSAGE: 100 mg. q.i.d. with meals and with food or milk on retiring. Supplied: Tablets, 50 and 100 mg.; Oral Suspension, 25 mg. per 5 cc. tsp.

REFERENCES: 1. Campbell, M. F.: Principles of Urology, Philadelphia, W. B. Saunders Co., 1957. 2. Colby, F. H.: Essential Urology, Baltimore, The Williams & Wilkins Co., 1953. NITROFURANS—a <u>unique</u> class of antimicrobials—neither antibiotics nor sulfonamides EATON LABORATORIES, NORWICH, NEW YORK

MEDICAL ECONOMICS · MAY 23, 1960 63

News

board of trustees shall reappoint all members unless the medical staff recommends otherwise." Ignoring this by-law will turn all staff by-laws into "just scraps of paper," the editors argue.

These arguments were presented to the trustees by a staff-appointed conciliation committee. But apparently the trustees didn't budge. Now the staff is appealing to its local medical society and to the Massachusetts Physician-Hospital Relationship Committee. And for disregarding its by-laws, the staff is even talking about taking the trustees to court.

Doctors Advised to Check Lease-Backs for Tax O.K.

Many doctors have profited by selling their offices and then leasing them back. But, in the future, a doctor had better (1) check with the Internal Revenue Service before leasing his property back for more than thirty years; and (2) be sure he's not a substantial stockholder in the firm that buys his office and then leases it back to him.

That's the advice of tax authorities who have studied a recent ruling by the U.S. Court of Appeals. The Court held that one taxpayer was within his right when

he sold a department store and then leased it back for a period that exceeded the thirty-year limit. But the I.R.S. has indicated it won't follow the decision outside the Court's jurisdiction. So only doctors in the Second Circuit (Connecticut, New York, and Vermont) stand a good chance of winning in such actions, say tax men.

What's more, one key point in the recent Court ruling makes it clear that the taxpayer had no financial arrangement with the firm that bought and then leased back his store. So a doctor who sells his office to a corporation he controls. or to a trust he establishes for his children, may find the Court opposed to him.

Still, say tax advisers, many doctors can profit by selling their offices and leasing them back for periods of less than thirty years. Here's why:

If the doctor sells his office at a loss, he'll get the benefit of an immediate deduction in his income tax.

He'll also be replacing fixed assets with working capital.

¶ Finally, he'll get the benefit of a rental deduction to replace the previous depreciation deductions. In the long run, he'll be better off because the depreciation would be used up in a specified number of years. END

New!...for appetite control



Helps stop overeating

CURBS APPETITE ... RELIEVES DIET TENSIONS

This new anorectic gives you dextro-amphetamine to curb your patient's appetite. It also gives you Miltown to relieve the tensions of dieting which undermine her will power.

In prescribing Appetrol, you will find that your patient's bad eating habits are considerably improved — and that she will stay on the diet you prescribe.

Usual desage: 1 or 2 tablets one-half to 1 hour before meals.

Each tablet contains: 5 mg. dextro-amphetamine sulfate and 400 mg. Miltown (meprobamate, Wallace).

Available: Bottles of 50 pink, scored tablets.

Appetrol

Propertion AMPHETAMINE + MILTOWAS

WALLACE LABORATORIES / New Brunswick, N. J.

for

ars.

an me

red

of

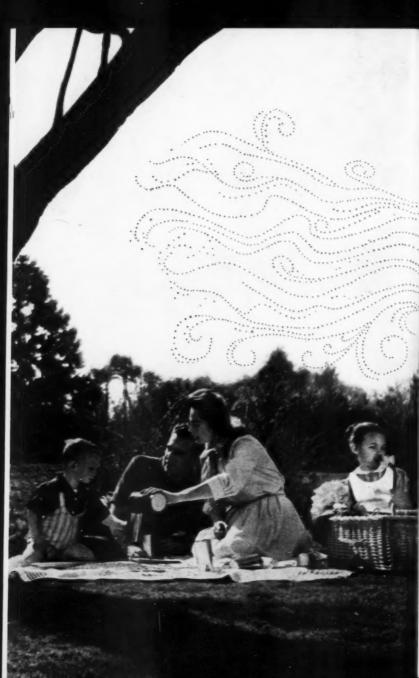
the

off

be

of

ND



when

more co

1016 60

also avail TRIAMINI 1/2 the form

TRIAMINI

Reference 1957. 3. Fart H.: Antibiot

Relief is pro because of timed-relea:

SM

when Pollen Polly "rides the wind...

Triaminic[®]

... relief from pollen allergies

more complete than antihistamines alone . . . more thorough than nose drops or sprays

The miseries of respiratory allergy can be relieved so effectively with Triaminic.¹⁻⁸ Triaminic contains two antihistamines plus the decongestant, phenylpropanolamine, to help shrink the engorged capillaries, reduce congestion and bring relief from rhinorrhea and sinusitis.¹ Oral administration distributes medication to all respiratory membranes without risk of "nose drop addiction" or rebound congestion.^{2, 2}

Each Triaminic timed-release Tablet provides:

Phenylpropanolamine	HCI					50	mg.
Phen ram ne maleate						25	mg.
Pyrijamine majeate						25	ma

also available:

TRIAMINIC JUVELETS®-

1/2 the formulation of the Triaminic Tablet with timed-release action.

TRIAMINIC SYRUP-

each teaspoonful (5 ml.) provides 1/4 the formulation of the Triaminic Tablet.

References: 1. Fabricant, N. D. E. E. N. T. Monthly 37:460 (July) 1958. Z. Lhotka, F. M.: Illinols M. J. 112:259 (Dec.) 1957. 3. Farmer, D. F.: Clin. Med. 5:183 (Sept.) 1958. 4. Florens, M.; Bodi, T. Mailen, S. R.; Hernando, Land Moyer, J. H.; Antibiotic, Med. & Clin. Ther. 7:37 (Jan.) 1960. 5. Halpern, S., R.; and Rabinotic, H.; Ant. Allergy 18:36 (Jan.) 1960.

Relief is prompt and prolonged because of this special timed-release action



first—the outer layer dissolves within minutes to produce 3 to 4 hours of relief

then—the core disintegrates to give 3 to 4 more hours of relief

SMITH-DORSEY · A DIVISION OF THE WANDER COMPANY · LINCOLN, NEBRASKA



to be sure she sleeps

SECONAL' SODIUM insures needed rest . . .

When you feel that your patient must have rest, Seconal Sodium often provides the welcome solution. It is both the fastest and the shortest-acting oral barbiturate you can prescribe. Whether the problem is simple insomnia or anxiety over a surgical ordeal soon to come, Seconal Sodium induces the sound sleep you want your patient to have. The usual hypnotic adult dose is 1 1/2 grains.

Seconal Sodium is available in 1/2, 3/4, and 1/2-grain Pulvules*. It is also supplied as ampoules, powder, suppositories, and Enseals* and as Elixir Seconal*.

Seconal* Sodium (secobarbital sodium, Lilly) Enseals* (timed disintegrating tablets, Lilly) Seconal* (secobarbital, Lilly)

Lilly

ELI LILLY AND COMPANY . INDIANAPOLIS 6. INDIANA, U.S.A.

100000

022008

says

And

head

need

it's u

pers

for i

arate

story

Medical Economics

INDEPENDENT NATIONAL BUSINESS MAGAZINE FOR PHYSICIANS, MAY 23, 1960

Don't Trade In Your Car

—Sell It!

Very often you can turn an initial loss on your old professional car into an ultimate tax gain. Here's how it's done

BY M. J. GOLDBERG

"Do you have an old car to offer in trade, Doctor?" says the automobile salesman. And you automatically nod your head.

That automatic nod may be needlessly expensive. Granted, it's usually wise to trade in an old personal car; you can get more for it on a trade-in than on a separate sale. But it's a different story with your professional car. Because of the way the income

tax laws are set up, you may well save real money by selling it separately.

No doubt you'll get less for it on a straight sale. But you're likely to save more money than you lose, because of the depreciation allowances you can claim on the new car you buy. To see how this can happen, consider the following fairly typical situation:

Let's say you bought a \$4,000

DON'T TRADE IN YOUR CAR-SELL IT!

car three years ago for use in your practice. Using the declining-balance method of depreciation and a three-year useful life for the car, you've claimed a total of \$3,851.85 in tax deductions for it. So its remaining tax value is only \$148.15.

Now let's suppose that you shop around and find you can get \$1,800 for the car on a separate sale, as against \$2,000 on a trade-in for a new \$4,000 auto-

mobile. For the sake of arithmetic, we'll assume you're in the 50 per cent tax bracket. What happens if you swap? What happens if you sell?

148

and

you

\$2,

nex

the

net

034

I

old

of 1

cau tax have you talyou imn \$41 B Sinc \$4,0 com tion Ove then \$3,8 ings

If you trade in the old car for \$2,000, you'll have a \$1,851.85 paper profit on the deal (\$2,000 minus the \$148.15 tax value). The amount you can depreciate on the new car is reduced by that profit. Thus, its tax value for depreciation purposes is only \$2,-



"You're no victim of modern civilization. You're not beat or lost. The reason you're rejected is simple: You're a no-good, lazy bum!"

MEDICAL ECONOMICS · MAY 23, 1960

\$89 the c

E

148.15. Under the declining-balance method of depreciation, you'll be able to claim a total of \$2,068.59 in deductions over the next three years. Since you're in the 50 per cent tax bracket, your net tax savings will come to \$1,-034.30.

IS

r

0

e

it

-

How You Save by Selling

But let's suppose you sell the old car for only \$1,800 instead of trading it in for \$2,000. Because you've written it down to a tax value of \$148.15, you'll now have a \$1,651.85 profit on it; and you must pay a long-term capital-gain tax on that profit. In your bracket, this will mean an immediate extra tax bill of \$412.96.

But now watch what happens. Since you've had to pay a full \$4,000 for the new car, you'll compute your future depreciation deductions on that basis. Over the next three years, you'll then be able to claim a total of \$3,851.85. So your net tax savings will total \$1,925.93. That's \$891.63 more than you'd save the other way.

Even when you subtract both

the \$412.96 capital-gain tax you must pay on the separate sale and the \$200 less you got for your old car, you come out \$278.67 ahead. Over the course of your professional career, the total saving can amount to a goodly sum.

Does the above suggestion apply to all doctors all the time? No. It's possible to do better on a trade-in, depending on your tax bracket and on how much you can get for your old car. The lower your bracket, and the bigger the spread between the separate-sale and trade-in prices, the better off you're likely to be if you trade the car in. And vice versa.

It's Worth Figuring

But don't just trade the old car in automatically, as so many doctors do. Shop around first and find out what you can get for it on a separate sale as well as on a trade. When you've figured out the tax consequences both ways, you'll know which is the better way for you. For many of you, the separate-sale way will be the better way. END



Could This Stock

Here's the transcript of an actual phone conversation between a high-pressure over-the-counterstock promoter and a prospect. Do you think you'd be able to hold firm against these get-rich-quick promises?

BY WILLIAM N. JEFFERS

Recently, an ad on the financial pages of a newspaper caught my eye. You know the kind I mean: It promised to let me in on an unnamed wonder stock with a fantastic future. All I had to do was fill out and mail the coupon.

Just for the hell of it, I did. As a result, I soon got a telephone call from a stock salesman. Here's the vigorous—if somewhat one-sided—conversation that followed. (The name of the stock and other details

"This stock is beautiful! And these 300 shares are yours for the asking."

YO

Oth ful mei

nan mor 31/4 too yield you

P

dealing chearow and 41, a

"Why
for 5

SA

YOU Resist Salesman's Pitch?

ld

ck

lau

ghro-

nk

nst

cial

ght

an:

un-

as-

fill

s a

the

d-

The

ails

hese

ng."

relating to it have been changed. Otherwise the transcript is a faithful one.)

SALESMAN: . . . What I'm recommending is Columbia Credit, a finance company in Chicago. In nine months, the stock has gone from 3½ to 5¾, which you'll agree is not too bad! Right now, the stock's yielding an 8 per cent dividend. So you know they're making money.

Primarily, the commodity they deal in is money. So you'd be buying money—and buying it very cheap. A finance company can borrow money at 4½, 5, and 6 per cent and lend the same money out at 40, 41, and 42 per cent.

JEFFERS: That's legal?

SALESMAN: Absolutely. I hate to

"Why do you want to let me have it for 5½ if you could sell it for 5¾?"





"It's a terrific growth situation! It'll move very quickly in the next couple of months!"

use these words, but they literally have to make money for you. Let me cite some experiences with finance-company stocks:

Seaboard Finance came out at \$7.50. They're now trading at \$20.50. Household Finance came out initially at \$15. They're now trading at \$30. Walter Heller came out at \$6.50 and are trading at \$38.25. Associates Investments came out at \$3.50 and are now trading at \$73.

I could go right on down the line and cite possibly thirty or forty companies that not only doubled or tripled their investments but that went sky-high! If Columbia Credit does only 10 or even 5 per cent as well as the other companies, it's our bluechip stock of the future!

Columbia's in its infancy. The stock itself hasn't started to scratch the surface yet. As I said, the commodity is money. You're not buying anything like consumer goods, where the customer has to come in and buy it off the shelf. So you're not depending on that. There's never a shortage of borrowers. No matter what town you go into in this U.S.A., wherever there's one bank, there are two or three finance companies. Am I right?

JEFFERS: Well, I suppose so. But where does *Columbia* get its money?

SALESMAN: Columbia goes to a bank. They have an open line of credit to the tune of \$2,500,-000 with six banks. They also have a \$500,000 bond issued to tl

A

n

th

th

go

C

Si

id

be

W

yo

W

my

ha

we

ing

thi



"It all sounds very convincing. Why don't you buy the shares you have on your desk?"

them by an insurance company. And insurance companies are the most conservative investors in the world. If they see fit to check these people and lend them half a million dollars, you know damn well you're dealing with a very good company.

After starting with two offices, Columbia is now operating in sixteen states. That'll give you an idea of its growth. Columbia can become national any time it wants.

As a broker, I'm bidding for your business, you must realize. When I give you a situation as my initial recommendation, it has to be something you'll do well with! This is how you're going to judge me. So I'm doing this: I'm basing all my future

business with you on this issue of Columbia Credit. Pick it up, and judge me on the outcome!

And I'll say this to you: Based on profits, you and I will be trading and trading for a long time to come. I mean this sincerely. Once I show you I can make money for you, I'm sure you'll go along with me on other transactions.

JEFFERS: Do you have a brochure on Columbia Credit?

SALESMAN: Yes, I'll send it right out. This stock is beautiful! You know as well as I do that we have winners as well as losers in the market. I'm giving you a winner with Columbia. I won't say you'll become a millionaire with it. However, I feel this way: Based on previous experience

ove

s!"

The

to aid.

u're con-

om-

off

end-

ra

nat-

this

one

e fi-

SO.

t its

es to

line

00,-

also

d to

t?

COULD YOU RESIST THIS STOCK SALESMAN'S PITCH?

with finance company stocks, you've got to do very well with it.

The stock is listed at 5¾. I've got 300 shares on my desk at 5½. Now, this is a quarter of a point under the market price. All these shares or any part of them are yours for the asking. You won't pay brokerage fees with me. You'll pay no commission, because we're the underwriters.

JEFFERS: But why do you want to let me have the stock for 5½ if you could sell it for 5¾?

SALESMAN: Very simple. We're allotted a certain amount of stock. Sometimes we get it just for new accounts; sometimes we get a canceled order. Then again, in the paper they have it listed at 5¾. You take ¼ off the bid, and you add it to the ask. And this gives you the true market price.

So by coming in at 5½, you're not going to pay me any brokerage fees or commissions. Why do I do it? Because, as a new account, you represent the lifeline of my business.

JEFFERS: I suppose so . . .

SALESMAN: That's it! You see, I've got everything to lose. Just suppose the worst happens, and the bottom falls out of the market. You could always recoup your money. But I couldn't get another client.

Again, you recommend your friends to me. I've had situations like this where a man has bought 100 shares from me, and the stock moved. Then let's say his brother-in-law called me and asked for a recommendation. I sold him 100 shares. Then he gave me his boss, and he bought 1,000 shares. So you see, you never know where it comes from in this business. It pyramids.

JEFFERS: Why don't you buy the Columbia shares you have on your desk?

A Tough Break

SALESMAN: I wish I could. I only wish they'd let me hold more. But they limit me personally. I bought the stock myself at 4. I won't sell my Columbia for less than 12! That's what I think of the stock! It's a beauty. It's a terrific growth situation. It's actively traded over the counter, and it's listed in the papers every day.

My opinion is this, that the

stock's going to move very quickly in the next couple of months, based on the idea that people will be coming in to borrow money for gifts, trips, vacations. They'll come to these finance companies, because if you go to a bank, the bank wants to know how much money you have before they'll lend money to you. In the finance companies, they're not as overcautious as the bank is.

nar-

oup

get

our

ions

1ght

the

his

and

n. I

n he

you rom

buy e on

ld. I hold rsonelf at a for think It's a sacenter, every

t the

JEFFERS: Is there a minimum

amount of Columbia you have to buy?

SALESMAN: Yes, we sell a 100-share minimum. Every time this stock moves a point, you'll have realized a \$100 profit on your investment. I'm not even mentioning the 8 per cent dividend, which comes to 2 per cent every ninety days. Judge me on the outcome of this situation! I know you'll do very well with it.

Why don't you do this? Come



"I told her to take maternity leave weeks ago!"

COULD YOU RESIST THIS STOCK SALESMAN'S PITCH?

in and pick up 200 shares of Columbia. Give me an opportunity. Give me a vote of confidence, and leave the rest up to me. Is that fair enough?

JEFFERS: Well, 200 shares . . .

SALESMAN: That would be \$1,100 net. I know you work hard for your money. And when you put your money to work for you, you want to buy the most for the money you're investing. I feel right now that Columbia will do the job for you. I tell you that because it's very simple: It's selfish. The more money I make for you, the more money I'll have to trade with. Right?

JEFFERS: Well ...

Hurry, Hurry, Hurry!

SALESMAN: Before I was talking to you, I had a fellow on my other telephone. He's holding 700 shares of Columbia. He wants another 300 shares. Professional traders are buying this for their own portfolios. It's got to go! Columbia you'll make money with! It's the handwriting on the wall.

JEFFERS: Do you feel there's any great rush to buy in?

SALESMAN: Yes, definitely yes. Let me tell you why, very simply. Once a finance company stock takes off, it will go—and all the way. The great rush is this: There's a lot of brokerage activity on this stock. When a broker comes in to buy a stock, it leads me to believe that the stock is getting ready to move. It might even go on the Exchange. So there's another situation that certainly won't hurt the stock.

JEFFERS: I'd really like to look over that literature.

SALESMAN: I'll send it out. But let me say this much. Give me a vote of confidence. Pick up a small amount of this Columbia Credit now.

JEFFERS: I'd have to look the material over, and I'd have to talk it over with my wife.

SALESMAN: No problem. When you're investing your money, you're investing it as a married man. There are times when you feel you have to make a decision, just as I have to do as a family man. Believe me, you won't get hurt with Columbia.

JEFFERS: It all sounds very convincing.

SALESMAN: Buy my confidence! Buy 100 shares! You'll have seven days to pay for your trade. Usually there's five. I'll give you two extra days. I'll say this to you, you won't see Columbia trading at 534 any more.

S.

n-

ny

nd

is

ge

a

ck, the . It ge. hat

ook

But

ne a

p a

ibia

the

e to

/hen

ney.

rried

you

sion.

mily

t get

very

The stock is definitely going to move. Come in with me right now! It will be a week before you have to pay for the trade. Let's see, today is the thirtieth, right? Now, suppose I send a confirm
Continued on page 274

he healer

Among a young G.P.'s first patients was a maternity case who soon developed marked morning sickness. One morning her husband phoned him to come at once—she was having a prolonged attack.

When the doctor got there, he found a "normally" nauseated and disheveled wife and a distraught husband. Hurriedly he prepared an injection and gave it to her. All would be well, he assured them, in a few minutes.

As they bathed the patient's face and waited for the antiemetic to take effect, the doctor suddenly felt a chilling doubt. Had he grabbed the wrong bottle and given her Apomorphine by mistake? A quiet check of his bag confirmed his fear.

There was nothing to do but confess. But just as he was about to, the Apomorphine hit in all its fury. For the next few minutes there was no time for conversation. The husband allowed as how this was the worst attack yet.

After the vomiting and retching had subsided, the young G.P. asked the husband to walk out on the porch with him, intent on admitting his mistake. He told him his wife would be all right now, but—

"Doctor," the expectant father interrupted, "I know that she will, and I just thank God that you got here before she had that last attack!"

—JAMES BASIL HALL, M.D.

Behind the tangled web of specialism:

THE SPECIALTY BOARDS

Are the boards too unrepresentative in their membership, too arbitrary in their requirements, too poorly coordinated for the whole profession's good? Five out of six surveyed specialists think so

By Wallace Croatman and Pearl Barland

Fully 70 per cent of medicine's full-time specialists have a vested interest in the present certification system. They've had the specified training, written the required case reports, passed the board's examination, and passed muster with board diplomates. Now that they have their certificates, you might think they wouldn't bite the hand that certified them. But you'd be wrong.

In a recent survey of 1,084 board-certified specialists conducted by this magazine, five out of every six sharply criticized what they consider serious flaws in the American board system. The boards themselves drew the sharpest criticisms of all, ranging from "a self-perpetuating clique of stuffy incompetents" to "a police force with no other purpose than to create privileged groups."

Some of this criticism is natural enough and needn't be taken too seriously. After all, the American boards are basically examiners—and who loves an examiner? They can't fairly be



SPECIALISM: THE BOARDS

blamed for falling short of infallibility. As an EENT man in Washington State points out: "The boards pass many men who have distinct holes in their personalities, and many marvelous physicians never become certified. If we had an exact science, it would be different. But we don't."

Nor can the boards fairly be blamed for the certification boom that has left them little time to take stock. Blame that on World War II and sequelae.

Back in 1939, there were only 14,000 board diplomates in the U.S. Then the armed services put a premium on board diplomas, and soon almost everyone else did too. By 1950, there were 33,000 board diplomates; by 1960, there were 72,000. All this has kept the specialty boards busy examining rather than self-examining.

Is it time the boards took a long, hard look at themselves?

The specialists surveyed by MEDICAL ECONOMICS believe it is. And while some of their criticisms miss the target, as indicated above, many of their criticisms deserve consideration. For example, take these three:

1. The boards are unrepresentative in their membership.

Of 222 members in the latest listing of eighteen specialty boards (preventive medicine excluded), only 18 per cent are under 50 years of age. The typical board member is about twenty-five years older than the average specialist taking his exams. That this creates problems is suggested by a well-informed physician on the A.M.A. staff.

"The men who are running the boards are necessarily oriented to practice and training as they were ten to twenty years ago," he says. "They should instead be training the young physician for what he will have to do ten or twenty years from now.

This article is the third in a series based on a survey of 1,084 board-certified specialists. The first, in the Feb. 15 issue, discussed the jurisdictional disputes that beset men in the various specialites. The second, in the April 25 issue, discussed the prevailing rules on practice limitation. In a subsequent article, board members will answer criticisms made in this issue. All articles in this series are copyrighted © 1960 by Medical Economics, Inc., Oradell, N.J. They may not be reproduced, quoted, or paraphrased in whole or in part in any manner whatsoever without the written permission of the congright owner.

Fifteen years after a man is certified, the nature of his specialty may have changed entirely; thirty years after he's certified, his specialty may have disappeared."

by

it

eir

in-

eir

n.

re-

est lty

-xs

ın-

cal ityage hat ugysi-

ing entas ears inhydo ow. lists. n the s on de in Inc .. irt in

The same point is made more bluntly by an ophthalmologist in

California. "Too much power is kept by the old fogies," he says -and the statistics indicate there's something to his criticism.

There's also something to the criticism that board members are "out of touch with private

Who's on the Specialty Boards?

Professors predominate among the 222 members in the latest listing of eighteen specialty boards (preventive medicine excluded). The breakdowns:

	Total Members	Full- Time Prac.	Part- Time Prof.	Full- Time Prof.	Full- Time Hosp.	Other
Anesthesiology	11	4	-	_	6	1
Dermatology	9	3	3	_	3	-
Internal medicine	13	1	1	4	6	1
Neurological surgery	12	2	4	3	3	-
Obstetrics/gynecology	12	2	4	2	4	-
Ophthalmology	12	5	2	1	4	
Orthopedic surgery	9	1	5	2	1	-
Otolaryngology	22	11	4	5	1	1
Pathology	12	2	-	4	6	
Pediatrics	10	1	2	2	5	_
Physical medicine	11	3	2	1	4	1
Plastic surgery	15	8	3	1	3	
Proctology	10	5	4	-		1
Psychiatry/neurology	12	1	3	3	4	1
Radiology	15	4	2	_	9	_
Surgery	18	1	2	8	6	1
Thoracic surgery	11	4	5		2	_
Urology	- 8	_	6	_	2	_
Totals	222	58	52	36	69	7

SPECIALISM: THE BOARDS

practice," as an Alabama radiologist puts it. Of the 222 members of eighteen specialty boards (preventive medicine excluded), only 26 per cent are in full-time private practice. Most of the rest are deeply enmeshed in medical education or hospital practice, and the radiologist quoted above thinks that's a bad situation. "The qualifications of the privately practicing specialist should be judged by his own kind," he says.

This criticism can be carried too far. Specialty boards are so intimately concerned with medical education and hospital training that they can't afford to get out of touch with those fields either. But a better balance would seem possible on boards like the one in internal medicine, where full-time private practitioners are outnumbered twelve to one.

Why is a better balance important? What's wrong with a



"If she calls me her 'little Boswell' once more, I'll go stark raving mad!"

SE

m

by

professor-dominated board? A New Jersey psychiatrist speaks for many of the surveyed specialists:

ed

SO

di-

in-

get

ds

ice

rds

ne,

ti-

ve

m-

a

d!"

XUM

"The professor (using that term generically) sees the patient cut away from his background. He has only a superficial knowledge of the patient's social, economic, cultural, and family background. Although he is loudest in proclaiming that we should treat the patient, not the disease, he is more likely than the private practitioner to see the disease isolated from the patient. Thus he's got a blind spot for things that are important in everyday practice."

What about the charge that board members are "a self-perpetuating clique"? This criticism rises out of the manner in which they're chosen. Prospective members of all nineteen boards are nominated by the leading speciaity societies and the A.M.A. section in each field. But the actual selection of future board members is made by old board members from the names offered by the nominating societies.

Board members are limited in

the amount of time they may serve (six-year single terms on some boards; two four-year terms on others). So there's a slow but steady turnover of people. But there's seldom a turnover of types. If the boards are to be made more representative, the nominating societies will obviously have to push this idea.

2. The boards are arbitrary in their requirements.

Examiners have to be somewhat arbitrary. But with nineteen specialty boards independently writing their own rules, the arbitrariness adds up to a crazyquilt pattern. The surveyed specialists cite many examples of board requirements that seem to them to go too far.

One board emphasizes this extreme rule: "Applicants certified by one of the other American Specialty Examining Boards will not be eligible for certification by this Board until they have relinquished the certificate previously conferred."* More

OA modification of this rule is expected in the next few weeks. Under the proposed rule, specialists will be allowed to keep their "old" certificates but will have to limit their practices entirely to the new specialty.

SPECIALISM: THE BOARDS

Rules like these make the surveyed specialists see red. Typical comment: "Why shouldn't a man be competent in two fields and practice both? It doesn't make sense to say that a man certified in neurosurgery, for instance, suddenly loses all ability as a general surgeon or as a neurologist. Yet under rules like this, a man could be accused of all sorts of things for holding more than one certificate. I say it's none of the boards' damn business!"

Specialists in several fields still talk angrily about another set of rules laid down three years ago. That was when the Board of Ophthalmology announced a new certificate in eye surgery. The board explained that candidates' case reports had indicated insufficient training in surgical ophthalmology. So it listed these requirements for the new certificate.

¶ A verified list of 200 operations performed during the three years following ophthalmology certification. The operations were to include "90 cataracts, 46 muscle, 24 glaucoma, and 40 operations including retinal detachment, diseases of the lacrimal apparatus, traumatic surgery, and plastic reconstruction."

Detailed case reports on thirty major surgeries, with all the types listed above adequately represented.

The written examination was to be taken by everyone wishing to qualify—even full professors.

Diplomates exploded almost as soon as this announcement reached them. They saw the new certificate as nullifying all previous certificates in ophthalmology. They wrote angry letters to the board. Even the staid Journal of Ophthalmology published a satiric letter that diplomates still talk about with relish. The letter writer chastised the board for not consulting him when he'd already developed his own plan for establishing a "Board of Ophthalmic Surgeons of the Right Eye."

All this furor caused the board to poll its 3,500 diplomates individually. Only 400 endorsed the new requirements. The board

Continued on page 278

Know Where You Stand Before You Sterilize

Preventive medicine—or mayhem? Kindness to the patient or an invitation to sue? The answers aren't simple, but they're important, as this lawyer-doctor symposium shows

BY CHARLES MILLER, M.D.

When Dr. Middleton phoned the operating room to schedule a salpingotomy, the O.R. supervisor asked the purpose of the operation. The doctor wasn't used to explaining himself to nurses and said so. "Well, sir," said the supervisor, "we have a rule against sterilizations that are solely for economic or social reasons. This might be considered a sterilizing operation. So unless it's medically indicated, you can't use our operating room for it."

Dr. Middleton was annoyed, but he kept his dignity. Before hanging up, he replied that he was going to talk to the executive committee of the senior staff about this. Since when, he asked himself, could anyone dictate to him the indications for surgery?

Dr. Middleton got his interview at the hospital. The conference was attended by Attorney Ranier, the hospital's general counsel. Having been forewarned, Dr. Middleton brought along his brother Austin, a lawyer. Also present were Dr. Johnson, a urologist and chairman of the medical staff's executive committee, and Dr. Carpenter,

t

e

is

IS

d

1-

ie

d 8

IT'S SAFE TO STERILIZE:

1. If the operation is necessary for medical or surgical reasons—apart from social or economic considerations.

2. If it's a so-called eugenic sterilization-provided that your lawyer says you're on firm legal ground. (The following states have laws providing for eugenic sterilization under specific conditions: Alabama, Arizona, California, Connecticut, Delaware, Georgia, Idaho, Indiana, Iowa, Kansas, Maine, Michigan, Minnesota, Mississippi, Montana, Nebraska, New Hampshire, North Carolina, North Dakota, Oklahoma, Oregon, South Carolina, South Dakota, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin.)

chief of the gynecologic service.

At the meeting, Dr. Middleton got right to the point. Said he: "Look, this woman has had five children already. So the couple has done its share toward the next generation—probably more so than anyone in this room. During the last pregnancy she had a toxemia. I think Dr. Carpenter will agree that another pregnancy might be fatal. Both husband and wife want the steriizing operation. Now don't tell me they ought to practice abstinence or put their entire trust in birth control. They have a right to some preventive medicine. Why shouldn't I perform the salpingotomy?"

Replied the hospital's attorney: "One reason is that any sterilizing operation might be considered a form of mayhem. Such an operation removes a vital part of a human being. Moreover, it's an interference with procreation; and, as you know from the abortion statutes, the law frowns on such an interference. I've looked this situation up, Dr. Middleton, and I've learned that unless sterilization is done for urgent and necessary therapeutic reasons—such as for a carcinoma—the operation is a punishable offense in several states. That's because their statutes against mayhem are interpreted to cover sterilization."

0 ti

al

ti

CI

"Hold on," said Dr. Middleton's attorney-brother. "Mustn't malice be proved if an action is to be called mayhem?"

The other attorney answered: "Of course, Austin-but remember that malice needn't mean malevolence or evil intent. Malice simply is a deliberate intent to do what the law forbids. Mayhem means mutilation. Under that interpretation, a doctor who intends to sterilize intends to violate the law. As a matter of fact, if death results from a sterilization performed in the absence of an overriding medical indication, a doctor could be charged with murder."

Dr. Middleton's brother was not convinced. "Can you cite any statute in any state that mentions sterilization and calls it a crime?" he asked.

The hospital's attorney conceded that he couldn't. But he added: "I can think of jurisdictions where sterilization might be classed as a crime against nature, or as disorderly conduct, or, to repeat what I said earlier, as mayhem. A sterilization that's performed with good intent, but not required by strong medical reasons, might well be construed as a crime."

Dr. Middleton came back into the discussion. "Have you ever known of a doctor who did a sterilization in good faith and was indicted?" he asked.

"No," replied Attorney Ranier. "But that isn't a reliable test. I'm told that in Canada, for example, it's illegal to sterilize a person who's in good health. Furthermore, if sterilization is considered to be against public

DON'T STERILIZE WITHOUT:

- 1. The written consent of both partners in a marriage.
- A written waiver from the patient of claims for damages, covering you against suit both if sterility turns out to be permanent or if fertility persists.
 - 3. A consultation with at least one other doctor.

or-

ny

be

m.

a

ıg.

ice

ou

es.

er-

lave on

ry as

on

ral

at-

er-

BEFORE YOU STERILIZE

policy or morals, then for two doctors to agree on a sterilization might open the door to a charge of criminal conspiracy."

Now the previously silent chief of the gynecologic service spoke up. Since he would need to approve of a sterilization before the surgery could be performed, he asked for details about the "conspiracy" factor.

The hospital's lawyer explained: "The law can be summarized rather briefly. Criminal conspiracy is a concerted plan of two or more persons to perform an act against public policy or morals."

"But I wonder how often the law is applied to sterilizations," said Dr. Johnson, the urologist. "I've come across a survey that shows the replies of 971 American urologists to the query: 'Have you ever done a vasectomy for the purposes of sterilization?' While 52 per cent said they had, only 9 per cent answered yes when asked if they had encountered any legal complications."

"Isn't that bad enough?"



"The lawyer says you don't have a leg to stand on."

t le

th ha O su do sto ifo wi wi sta asked Attorney Ranier. "Of about 500 of those doctors who performed sterilizations, perhaps eighty-five or ninety *have* encountered legal difficulties. See the danger?"

or

the

15."

ist.

hat

eri-

ery:

my

on?

iad,

yes

en-

ica-

h?"

"Yet I understand that in some states sterilization is actually required by law," said Dr. Middleton.

Eugenic Sterilization Laws

"You're thinking of eugenic sterilization," said his brother. In many states, a doctor who performs such an operation is in the clear as long as he meticulously follows the state law. I have some notes on eugenic sterilization that tell the story."

He began to read aloud: "Eugenic sterilization laws exist in twenty-nine states. In eleven of these, no sterilizations seem to have been done under these laws. Of the eighteen states in which such sterilizations have been done, the leaders in number of sterilizations performed are California with 20,011, Virginia with 6,925, and North Carolina with 5,095. These plus other states' totals add up to 60,926

eugenic sterilizations since the laws were enacted."

"That's all very interesting, Austin," commented his doctor-brother. "But it doesn't solve our immediate problem. Here's what I want to know now. Suppose an unquestioned medical or surgical justification exists for a sterilization. Suppose a physician, in good faith, in a reputable hospital, after proper consultation, does the sterilizing operation. Has this ever caused legal troubles?"

One Opinion

"I don't know of any," said Attorney Ranier. "And there's an opinion by a law firm that's worth quoting in this connection. I must tell you, though, that this firm-Greenbaum, Wolff, and Ernst of New York—is counsel to the Human Betterment Association, an organization that supports sterilization. At any rate, they write that a physician is safe in doing a sterilization 'if, in his opinion, the operation is necessary for the protection of, and in the best interests of, the patient's well-being." More

BEFORE YOU STERILIZE

"In other words, as these lawyers see it, the doctor's opinion is sufficient. They say the operation needn't be classed as healthsaving or life-saving. The requirement is only that it be 'in the best interests of the patient's wellbeing."

"Then doesn't that put a doctor in the clear?" asked the urologist.

'Play It Safe'

"Not necessarily," replied the hospital's attorney. "Remember, these are advocates speaking, not judges. I feel that, to support such an operation, you'd do better to rely on medical or surgical necessity than simply on concern for the patient's wellbeing. After all, who knows how a court might interpret that phrase 'well-being'? The fact that it's expensive to support a child might mean to some doctors that it would be to a certain patient's well-being not to have any children. Yet that idea would scarcely justify sterilization. For a doctor who wants to play it safe, I'd say: Don't sterilize unless there's unequivocal

medical or surgical necessity."

At this, the chief of the gynecologic service frowned. "Aren't you being a bit overcautious?" he asked Attorney Ranier. "You just said you've never heard of a doctor's being convicted for doing a sterilization in good faith. Doesn't that prove something?"

"Sure. It proves that legal precedents are hard to find," the lawyer replied. "And from this, I conclude that there's a risk in doing a sterilization for reasons of the patient's convenience, comfort, or well-being. The risk is small; but it's there. The doctor who ignores it does so at his peril."

Consent of Both Needed?

"I once had a case where I was asked to sterilize a woman without the knowledge of her husband," recalled Dr. Carpenter. "I decided that if my wife had something like that done without my knowledge, I'd feel that she and the doctor had been dishonest with me. My lawyer said an adult woman could give consent to an operation on herself

without any ratifying consent of her husband. But I still didn't do the operation."

ne-

en't

s?"

ou

of

for

boo

me-

egal

the

his. k in

sons nce. risk dochis

re I man husnter. had hout she dis-

said conerself

"You were right," said Austin Middleton. "I've found a Canadian case where it was held that such an operation without the knowledge of the spouse was an act of cruelty, because it permanently deprived the husband of the opportunity of parenthood. On this ground, the husband was granted a divorce."

"Another danger is that some

courts equate sterilization with abortion," said Attorney Ranier. "They rule that both procedures seek to interfere with the normal and natural processes of reproduction, and that therefore both are against public policy."

"I see the danger once a sterilization case gets to court," said Dr. Johnson. "But is a patient likely to take it to court?"

"He certainly might threaten to do so," answered the hospital's attorney. "That's where the



"Will you mail this for me, right away?"

BEFORE YOU STERILIZE

malpractice angle comes in. If for any reason a patient considers suing the doctor after a sterilizing operation, he's all the more tempted to do so because he assumes that the doctor will go to great lengths to avoid publicity.

"Two hazards here are infections or unexpected disabilities resulting from the operation; and natural re-anastomosis resulting in pregnancy. Thus, if something goes wrong, you're in potential trouble. If nothing goes wrong, you may be in trouble, too. With a sterilization, you might be sued simply because you were too successful."

"How's that?" asked Dr. Carpenter. "Simply that if a sterilization is successful, the doctor can't be sure that the patient won't later change his or her mind—and bitterly resent the disability. If that happens, a common dodge is for the patient to allege that the doctor never explained how permanent the loss would be.

"When the patient and spouse sign consent for a sterilization, the form should indicate that they have been told that the sterility may be permanent; that they have also been told that the operation may not succeed; and that they agree to release the doctor from any claims based either on permanent sterility or on persistent fertility."

Continued on page 294

ow to lose a patient

The other day I asked a patient if she'd prefer having a shot of penicillin in her arm or in her hip.

"Is there any difference?" she asked.

Without thinking, I replied, "Well, it's just about as broad as it's long."

—JAMES S. HAIMSOHN, M.D.

For each previously unpublished anecdote accepted, MEDICAL ECONOMICS pays \$25 to \$40. Address: Anecdotes, Medical Economics, Inc., Oradell, N.J.

Should You Drop a Life Insurance Policy for a 'Better' One

Swapping an old contract for the latest model seldom makes much sense. Consider these facts before you make a substitution

By M. J. Goldberg

A year or so ago, a young Eastern physician bought a \$10,000 ordinary life policy and paid the first year's premium of \$245 in full. Before his second premium notice arrived, an agent from another company called on the young doctor.

"Why strain your finances to pay that lump-sum premium?" the salesman asked. "Under the new triple-protector policy my company issues, you can pay your premiums in small monthly installments. That way, you'll be able to budget the expense."

The sales talk worked. The doctor dropped his old policy and took out the new one. Unfortunately, he soon learned that the agent had failed to mention two important facts:

First, the doctor's original insurance company would have arranged monthly payments on request. Secondly, by changing policies, the doctor was sure to lose out on the cash values and divi-

W

n, at

at

he

nd cer

er-

94

DROP A POLICY FOR A 'BETTER' ONE?

dends his old coverage would begin to pay in its second year. The only one who had anything to gain from the switch was the insurance agent. The doctor had been "twisted."

In life insurance circles, "twisting" is a dirty word. It's the shoddy sales device of talking a prospect into giving up one policy for the sake of another. Without exception, insurance companies condemn the practice. (You

were probably asked on your last application whether the policy was to replace a contract issued by another company.) And in most states, twisting is actually illegal.

Just the same, insurance men admit freely that the practice flourishes. "The industry must take a big share of the blame," concedes one company official. "In the last few years, we've come out with a whole flock of



"We call it a visual diuretic."

ad mi ma pay of t

icy

S

executive specials, family plans, borrow-to-pay policies, and other gimmicks. All these are ammunition in the hands of the twister. They help him persuade policyholders they'd do better by making a switch."

ast

icy

ied

in

ally

nen

tice

nust ne."

cial.

e've

k of

There are times when a switch is indicated. But these are comparatively rare.

Why Not to Switch

Unlike life insurance, a car deteriorates in value, and a common stock investment may go sour. Both should be dropped after they've outlived their worth. But life insurance is a long-range protection and savings device. The benefits are contractually guaranteed. What's more, their value grows each year as the cost goes down. Here's why:

A life insurance company spends between \$50 and \$100 to put a new policy on its books. In addition, roughly one year's premium goes to the agent who made the sale. The policyholder pays all such costs. And the bulk of them are written off in the policy's early years.

So you have to pay for such

things all over again if you switch policies. What's more, your premium rate is bound to be higher -even though it may not seem so as the agent describes it. As every doctor knows, all premium rates rise with age.

Some other disadvantages of switching to a new policy:

- ¶ You have to go through another one- or two-year contestable period, during which death claims could be challenged for medical reasons or because of misrepresentations in your application.
- ¶ Your old policy may contain disability, double indemnity, and waiver of premium riders that can no longer be bought at the same low rates.
- The annuity option in your old policy may be 20 per cent more favorable than you can get now.

Far from mentioning any of these things, a real pro at the game of twisting is likely to come up with some seemingly convincing reasons for making a change. Writes Ralph G. Engelsman, an authority on the subject:

"By assuming that the pros-

DROP A POLICY FOR A 'BETTER' ONE?

pect will continue in high-income brackets for years to come, by presenting illustrations of several hard-to-understand columns of figures, by assuming continuous capital gains, by introducing inflationary prognostications, the sharp agent can hypnotize his victim. Sometimes the agent even hypnotizes himself to a point where he believes the stuff he's handing out."

Twister Talk

Here are some of the arguments a twister is likely to use, together with the facts that confute them:

"Why hang on to that old policy? After all, you've already borrowed all the cash value. And you have to pay 5 per cent interest on what you've borrowed. Why don't you get out from under that burden and start in fresh?"

You do pay 5 per cent interest on whatever cash value you borrow. But while you're doing so, your policy continues to earn interest at a rate of 3 per cent or more on its full cash value. Thus, the *net* cost of your borrowing is only about 2 per cent. That's a modest price to pay for keeping an old and therefore valuable insurance policy in force.

"Just look at the discount you can get on our new jumbo executive special! That alone is a good reason for you to get rid of all those pint-sized policies you now own."

No doubt about it, the quantity discounts being offered for large-sized policies are worth considering—but mostly for additional coverage. It seldom pays to drop an old policy to get them. The top saving on a big contract is usually about \$2 for every thousand dollars of coverage. It might be fifteen to twenty years before your savings on such a switch amounted to the commissions you'd have to pay on the new contract.

"Wouldn't you like to put some extra money into the stock market, as a hedge against inflation? By switching to this low-cost policy, you'll have as much death protection as your old policy offers you. And you'll save \$1,000 a year to buy stocks with. Those investments are bound to

EFFECTIVE THERAPY FOR TINEA PEDIS (ATHLETE'S FOOT) AND OTHER RINGWORM INFECTIONS



Before treatment, T. rubrum infection.

typical response of tinea pedis to GRIFULVIN

- . Itching and burning relieved in 2 to 6 days
- vesicles and scaly patches disappear completely, cultures and KOH scrapings usually become negative in 2 to 6 weeks
- · side effects are rare, mild and transitory

Average dose: 250 mg, q.i.d. Adjunctive treatment with topical keratolytic agents will aid in eradicating the fungi from the skin of the feet.

Supplied: 250 mg, scored tablets, colored aquamarine, imprinted McNEIL, bottles of 16 and 100.

Blank, H.; Smith, J. G., Jr., Roth, F. J., Jr., and Zaias, N.: , A.M.A. 171:2168 (Dec. 19) 1959.

MCNETT MONET LABORATOR ES, INC . PHILADELPHIA 32, PA.

h

1-

e

2.

0

DROP A POLICY FOR A 'BETTER' ONE?

build up a lot faster than insurance cash values."

If you have too much money in fixed-dollar investments, perhaps you *should* switch to a cheaper form of insurance and put what you save into stocks. But you'd do best to switch to a cheaper policy issued by your present company. That way, you wouldn't have to pay another agent's commission. You might not have to take another physical, either. And you wouldn't lose all the rights and benefits you now have under your original contract.

Continued on page 106



"No, I never worked for a doctor; but I have been sick . . . "

NOW!

A Modern Centralized

STERILE SUPPLY

for Offices and Clinics ...

DOUBLE Cabinet Sterilizer...





Compact, convenient and easy to operate, the new Amsco Double Cabinet Sterilizer features a handsome double cabinet and utility drawer with ample storage space for instruments and supplies—and a built-in automatic-

ally burn-out proof Office Instrument Sterilizer. The cabinet is also available with a solid top without the recessed boiling-type sterilizer.

The large formica counter provides ample room for work space, while the roomy cabinet and drawers are safe for storage of sterile supplies . . . ready for instant use. The efficient, recessed type A-416 S non-pressure sterilizer is fabricated entirely of stainless steel, insulated construction with two trays — one for instruments, the other for needles.

One of the ten popular colors available with the DB-16M will blend perfectly with your office decor. A single cabinet with the same mechanical features is also available.



Amsco's large Office Pressure-Steam Sterilizer, 613-R Dynaclave, or 8" Square Autoclave, Cat. No. 8816, can be conveniently located on work counter of the double cabinet.



See the new Double Cabinet Sterilizers at your authorized Amsco dealer or write for Bulletin DC-404

er ht si-

its gi-

06





indicated in all degrees of hypertension

effective by itself in most hypertensives

HYDRODIURIL with RESERPINE

HYDROPRES can be used:

- ▶ alone
 - (In most patients, HYDROPRES is the only antihypertensive medication needed.)
- as basic therapy, adding other drugs if necessary
 - (Should other antihypertensive agents need to be added, they can be given in much lower than usual dosage so that their side effects are often strikingly reduced.)
- as replacement therapy, in patients now treated with other drugs (In patients treated with rauwolfia or its derivatives, HYDROPRES can produce a greater antihypertensive effect. Moreover, HYDROPRES is less likely to cause side effects characteristic of rauwolfia, since the required dosage of reserpine is usually less when given in combination with HydroDIURIL than when given alone.)

HYDROPRES-25

HYDROPRES-50

25 mg. HydroDIURIL, 0.125 mg. reserpine. One tablet one to four times a day. 50 mg. HydroDIURIL, 0.125 mg. reserpine One tablet one or two times a day.

If the patient is receiving ganglion blocking drugs or hydralazine, their dosage must be cut in half when HYDROPRES is added

For additional information, write Professional Services, Merck Sharp & Dohme, West Point, Pa

MERCK SHARP & DOHME, DIVISION OF MERCK & CO., INC., West Point, Pa.

SHYDROPRES AND HYDRODIURIL ARE TRADEMARKS OF MERCK & CO., INC.

Excellent results in a wide range of common

XUM

de

The Upjohn Company Kalamazoo, Michigan

Clinical use of Oxylone in an allergic skin reaction due to a drug

Photographs by courtesy of W. C. Grater, M.D.



before treatment



after 7 days



after 14 days

Oxylone*

the first steroid developed specifically for topical application

also available

Neo-Oxylone*

for infected dermatoses

Supplied in 7.5 Gm. tubes with applicator tips:

Oxylone Cream—
each gram contains 0.25 mg.
(0.025%) fluorometholone.
Neo-Oxylone Topical
Ointment—

each gram contains 0.25 mg. (0.025%) fluorometholone and 5 mg. neomycin sulfate (equivalent to 3.5 mg. neomycin base).

References:
1. Peristein, S. M.:
Antibiotic Med, & Clin.
Therapy 6:575 (Oct.) 1959.
2. McCormick, G. E., Jr.,
and Olansky, S.: Ibid., p. 581.

*Trademark, Reg. U. S. Pat. Off.



DROP A POLICY FOR A 'BETTER' ONE?

"Under this new type of policy, you can borrow each year's increase in cash value and use the money to help pay your annual premium. After a few years, all you have to pay is interest on the borrowed money. And that's tax-deductible. This is the cheapest form of coverage you can get—even cheaper than term!"

Maybe so—depending on your income tax bracket. A borrow-to-pay policy that's cheaper for a man in the 50 per cent bracket may be much more expensive for a doctor with a smaller income. But insurance twisters are notoriously careless about bringing up that fact.

In any case, you don't have to switch policies to borrow on your life insurance. You can do it on the permanent insurance you already own. Insurance companies gladly add automatic premiumloan clauses at no cost. Then your premiums are paid automatically out of your accumulated cash value. Since cash values and dividends increase the longer you hold a policy, you're much better off borrowing on an old policy than on a new one.

Normally, then, it's better to hang on to an old policy than to switch to a new one. There are a few times when it might be sensible for you to make a substitution, though.

When You Should Switch

For example, you may want to change both the kind and amount of insurance you own, because of the way your personal investment program is developing. Or you may want to switch to a cheaper form of coverage if a high-cash-value policy proves too expensive. You may even discover that you were ill advised when you bought your old contract. As long as companies offer many different types of policies and your needs continue to change, a replacement may be in your best interest-under certain conditions.

But how can you be sure that you should make a switch? When and if an insurance agent recommends that you do so, you'll protect yourself by following these four rules:

1. Ask the agent to put all his Continued on page 110

Cardiovascular Patients Fare Better



002012

Becotin with Vitamin C

protects against "diuretic washout"—Patients undergoing diuresis may require dietary supplementation with B complex and C vitamins to replace these water-soluble factors.

fortifies restricted diets—It is difficult to devise diets which are severely limited in salt, cholesterol, or calories yet still supply adequate vitamin intake. Becotin with Vitamin C provides generous amounts of the water-soluble B complex and ascorbic acid plus all the vitamins naturally occurring in desiccated liver and stomach tissue. Prescribe 1 to 3

Pulvules® daily, according to the degree of diuresis or dietary restriction.

Becotin® with Vitamin C (vitamin B complex with vitamin C, Lilly)

LILLY VITAMINS ... "THE PHYSICIAN'S LINE"

ll ir i-

y

:n

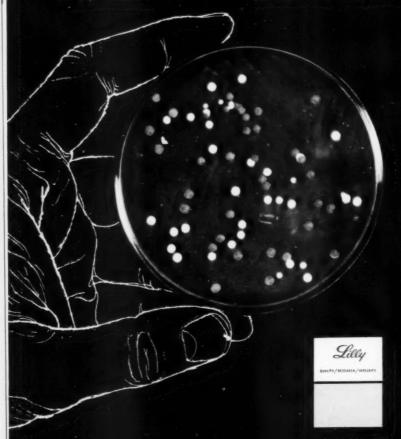
)-

se

is

0

"In our hands it has been particularly helpful



in STAPH. INFECTIONS

i

I

a : ou of

Ilo

Sul

in the treatment of staphylococcic disease."1

In difficult staph. infections, a decisive response may be obtained with Ilosone® in a high percentage of cases.

In a study¹ of 105 patients, sixty-four of whom had Staphylococcus aureus infections, good results were obtained with Ilosone in 94 percent. Ten subjects had previously failed to respond to other forms of chemotherapy. The authors concluded that Ilosone "... is useful in treatment of a number of common infections and has been effective in treatment of a number of less common and more serious infections.... In our hands it has been particularly helpful in the treatment of staphylococcic disease."

Ilosone is available in **Pulvules***, 125 mg. and 250 mg.; Lauryl Sulfate **125 Suspension**, 125 mg. (base equiv.) per 5-cc. tsp.; and Lauryl Sulfate **Drops**, 5 mg. (base equiv.) per drop. Usual dosage for adults and children over fifty pounds is 250 mg. every six hours.

llosone® (propionyl erythromycin ester, Lilly)

1. Smith, I. M., and Soderstrom, W. H.: J. A. M. A., 170:184, 1959.

ELI LILLY AND COMPANY . INDIANAPOLIS 6, INDIANA, U.S.A.

032583

S ILOSONE WORKS

DROP A POLICY FOR A 'BETTER' ONE?

figures in writing, on his own letterhead. Insist on seeing how the proposed plan would work out for you, year by year, at least until you reach 65. Make the salesman explain the tax, interest, and investment assumptions he uses in his calculations. If the assumptions don't fit your particular situation, the schedule is wrong for you. (In other words, make the agent prove that the switch is to your advantage as well as to his. You'll generally find that it isn't.)

2. Send a copy of the agent's

proposals to the man who sold you your original policy, and ask for his comments. And check the proposals with someone else your financial adviser, for example, or an insurance-minded colleague.

 See if your present life insurance company won't make the changes you want on your old insurance policy. Most companies will, if they can.

4. Don't drop one policy until you've secured a replacement, no matter where you buy your insurance.

Right ward, wrong sex

I admitted a pretty teen-ager with appendicitis to the last hospital bed available. As she was being eased into it, her mother, very agitated, rushed out into the hall where I was talking with the floor nurse.

"I won't have it!" cried the mother. "You can't put my daughter in with male patients!"

Puzzled, I followed her back into the ward. She pointed indignantly toward the far end. There I was startled to see two patients with crew haircuts.

In the next instant I realized who they were: elderly ladies recuperating from head surgery.—M.D., CONNECTICUT

For each previously unpublished anecdote accepted, Medical Economics pays \$25 to \$40. Address: Anecdotes, Medical Economics, Inc., Oradell, N.J.

Sim

Patie usef

Pres

newest advance in iron therapy



PATIENTS ON SIMRON REPORT NO GASTRIC UPSET, NO BLACK STOOLS, NO CONSTIPATION OR DIARRHEA

Simron is iron (ferrous gluconate) in a dramatically different agent® which facilitates iron absorption. Eliminates cause of iron intolerance: Simron increases iron absorption in the G.I. tract. That's why it cancels the need for "iron overload." The greater absorption of usable iron virtually eliminates nausea, G.I. upset, or black stools. In a series of 40 Simron-treated patients,¹ only one reported side effects. Patients who "can't take iron"—now can: Simron is preferred wherever iron is indicated. Especially useful in patients who can't tolerate other iron therapies—for example, gravida, duodenal ulcer, colitis—where gastric upset is discomforting and black stools may mask a serious condition.

Prescribe one capsule t.i.d. between meals. In bottles of 100 soft, gelatin capsules, containing 10 mg. ferrous gluconate and Sacagen. **Sacagen.***special absorption agent.

SIMRON

*Sacagen-special absorption agent. Trademarks: 'Simron,' 'Sacagen' 1. Ausman, D. C.: J. Am. Geriatric Soc. 7:268, 1959



THE WM. S. MERRELL COMPANY New York . Cincinnati . St. Thomas, Ontario

MEDICAL ECONOMICS · MAY 23, 1960 111

Clinical Study of a New Way of Gargling

THEODORE A. SCHWARTZ, M.D. WILLIAM H. SLASMAN, M.D. Mercy Hospital, Baltimore, Maryland

A new way of gargling is described, which shows definitely greater overall efficacy when compared to the ordinary way of gargling.*

The usual gargle techniques do not permit medications to reach beyond the anterior tonsillar pillars with any predictable consistency. This may be due to a) the triggering of the gag reflex, b) a too brief time of contact and c) an insufficient total amount of medication. Therefore, the evaluation of topical medication for throat complaints is difficult, because of the lack of uniformity in gargling. A new method of gargling was devised in an attempt to overcome these major difficulties.

BACTERIOLOGIC BACKGROUND

It was found in a bacteriologic study using non-pathogenic throats, that the new gargling technique reduces significantly the total bacterial count on the posterior pharyngeal wall, whereas the usual techniques did not. Apparently, this new standardized gargling method brings the solution into contact with the posterior pharyngeal wall for a long enough period and in sufficient quantity to produce marked anti-bacterial activity.

RESULTS

In the present study, only patients with clinically pathologic throats were used. Clinically, the new method was definitely more efficient in providing symptomatic relief than was the standard technique. This was most evident when the pathology was present on the posterior pharyngeal wall. Patients with subjectively bothersome postnasal discharge sometimes experienced quite dramatic relief. The longer the use of the medication with the new technique the more pronounced was the relief.

Interestingly enough, the patients reported that when using the new technique, they could for the first time actually feel the solution in the back of the throat.

CONCLUSION

We are of the opinion that the new way of gargling when performed correctly 'offers a definite superiority to other techniques.

Directions of new gargling method: Take about ½ ounce of the antiseptic solution into your mouth. Then, tilt head back slightly. Breathe in deeply through the nose, later breathing out slowly. Thrust tongue forward and, while saying "A-a-h", gargle for 30 seconds.

^{*}For free copy of the full report or professional gallon size of Listerine Antiseptic, available at \$3.00, or both, write to Professional Division, Warner-Lambert Pharmaceutical Company, Morris Plains, N. J.

¹¹² MEDICAL ECONOMICS · MAY 23, 1960

How to Train Your New Aide

Breaking in an employe takes time and trouble, but you'll save both later if you do it right. Here are some suggestions

By Horace Cotton

A timid new face under a neat nurse's cap looked at me across the reception desk in the doctor's office. "Hello!" I said. "Where's Trudy?"

"She's not working here any more. She left last Saturday," replied the timid voice that went with the timid face.

So I introduced myself to the new aide as her employer's management consultant and told her I had an appointment.

"Are you sure?" she asked.

Mrs. Johnson—that's what her name turned out to be—was

an easily flustered type. Evidently she'd never heard of me, nor was there a record of my name on the day's schedule. Embarrassed, she stammered an apology and suggested that the doctor must have been detained at the hospital.

"I just started here this morning," she told me. "The doctor stopped by my house last night with the key and asked me to open up the office and wait till he came. I've never worked in a private office before. I've been do-

Continued on page 116

THIS ARTICLE is the fourth in a series. Earlier articles dealing with finding and hiring an aide appeared in the Feb. 15, March 14, and April 25 issues of MEDICAL ECONOMICS.

ts re

as ng dnt

on

nts stri-

ger he

ed

nts

ew

me

ick

iew

or-

to

od:

ptic

ead

ugh

wly.

says.

00, or N. J.

the corticosteroid that adapts t



effectively treats the primary disorder in steroid-responsive patients...helps to minimize or avoid certain unwanted corticosteroid effects in the OBESE

△ CARDIAC

HYPERTENSIVE

EMOTIONALLY LABILE

pts treatment to the individual patient

spot your steroid-responsive patient and the problem

the obese arthritic:

On Kenacort, the obese arthritic is likely to experience 2 basic therapeutic effects

· alleviation of arthritic symptoms

 welcome reduction or elimination of many undesirable steroid effects

no salt or water retention absence of edema no voracious appetite no unnatural euphoria no secondary hypertension less chance of G.I. upset

Kenacort is highly rated:

least likely to produce sodium or fluid retention
of all leading corticosteroids^{1,2}... preferable in
patients with cardiac disease or other conditions
presenting this problem³

 ... and because of appetite suppression properties, triamcinolone (Kenacort) may be helpful in the obese arthritic, and especially the obese arthritic with chronic heart disease or psoriasis"³



KENACORT

Squibb Triamcinolone

While Kenacort is notable for its low incidence of collateral hormonal effects, it should, like all potent corticosteroids, be administered to patients under careful clinical supervision. Detailed information available on request.

Kenacort is available in 1 mg., 2 mg., and 4 mg. scored white tablets. References: 1. McGavack, T. H.: Clin. Med. 6:997 (June 1959). 2. Plotz, C. M.: Paper on administration of corticosteroids in rheumatoid arthritis, presented at the 11th Annual Scientific Assembly of the New York Academy of General Practice, New York City, (October 20, 1959). 3. Williams, G. T.: Southern Med. J. 52:267-273 (March 1959)





Squibb Quality - the Priceless Ingredient

"KENACORT" IS A SQUIRE TRADEMARK

ing industrial nursing since I finished hospital training."

There were already two patients in the waiting room—people who'd shown up early for their appointments. It was obvious that when Dr. Russell (as I'll call him) did get in, he'd have to set to work right away. Mrs. Johnson was destined to play it

by ear on her first day in a new job. It was a classic example of how *not* to break in an aide.

I couldn't wait for Dr. Russell at the time, so I dropped in on him at home that evening. I thought he'd appreciate my making a few suggestions before it was too late.

"I have to admit it was a little



IF YOUR AIDE hasn't had experience with the bookkeeping system you use, get your accountant or management consultant to explain it to her.



Tastefully tailored to the antibiotic needs of pediatric patients

and the same of the same of positions particular

oxytetracycline with glucosamine

Delicious in taste: the appealing flavor of sweet, fresh fruit Decisive in action: the well-tolerated broad-spectrum efficacy of Terramycin® with glucosamine

Preconstituted for uniform potency, efficacy, and taste-appeal from the first dose to the last.

Cosa-Terrabon Oral Suspension — 125 mg. oxytetracycline/5 cc., 2 oz, and 1 pint bottles

Cosa-Terrabon Pediatric Drops - 100 mg. oxytetracycline/1 cc., 10 cc. bottle with plastic calibrated dropper

Pfizer Laboratories, Div., Chas. Pfizer & Co., Inc.,

*Trademark

Brooklyn 6, N. Y.

Pfizer Science for the world's well-being



118 MEDICAL ECONOMICS - MAY 23, 1960

he

ht ne

or-

ial

he

ep

nit-

nts ph-

ay-

an-

om-

on-

able

, 80

mg.

uter v con-

which ly re-

rapid effect.

ntab

dica-

adilat-

unfair to pitch Mrs. Johnson into the stream before she'd had a chance to wet her toes," he conceded. "But what's a busy man to do? If I had two girls, one could teach the other. But mine's a one-girl office, as you know."

"Granted," I said. "Still, why didn't you at least arrange for Trudy and Mrs. Johnson to work together a week or so before Trudy left?"

"I was between two fires," the doctor explained. "Trudy was firm about leaving last Saturday. Her baby's due in a couple of weeks. And Mrs. Johnson had to give notice at her old job. She wasn't able to start with me till today. What could I do?"

"Just what you're going to do tonight," I said. "Call Trudy. Ask her if Mrs. Johnson can go to her house tomorrow evening—and maybe a couple of nights after that—to pick up all she can about the way your office works. Pay them both for the time they put in.

"Then, for the next couple of days, try to go to the hospital early, so you can get to your office an hour or so before your



GET A TECHNICIAN to bring your aide's lab techniques up to date.



BLUE PLAN PEOPLE will show her the proper way to submit claims.

MEDICAL ECONOMICS · MAY 23, 1960 119

first patient's due. The point is, you've got to find time to show Mrs. Johnson where things are and how you like things done."

"I'll try to do it," said Dr. Russell. "And I'm sure Trudy will cooperate."

It's rare for a new aide to have

Duties of a Doctor's Aide

Use this check-list—revised to fit your office routine—as a guide when breaking in a new girl. She can then build her own schedule.

RECEPTION ROOM

Greet patients and visitors. Answer queries. Answer telephone. Record full names, addresses, and phone numbers of new patients and other responsible callers. Take down preliminary casehistory data and other important information.

Make appointments and hospital-admission reservations. Schedule surgery.

EXAMINING ROOM

Between examinations, replenish supplies, change linens, dispose of waste.

Prepare patients for examination.

Lay out instruments, gloves, and medications.

Assist during examination of female patients.

MAIL, TYPING, FILING

Open (if authorized) and sort mail. Handle routine mail.

Type case histories, examination reports, and correspondence. Fill out insurance, Workmen's Compensation, and other forms.

File case histories, paid invoices, patients' account cards, correspondence.

ACCOUNTING

Start charge slips. Keep a daily record of charges, payments, and expenditures.

it as rough as Mrs. Johnson did on her first day. Yet, as I told Dr. Russell, it's my experience that many physicians tend to let their

aides learn by making mistakes. That wastes time and causes trouble.

No two offices are alike. Thus,

Post charges and payments on each patient's account card. Prepare payroll and other checks on a regular basis. Make bank deposits. Reconcile monthly bank statements. Prepare withholding-tax, Social Security, and unemployment-tax returns.

Keep track of petty cash deposits and withdrawals.

COLLECTION

S-

ill

ve

de

le.

ne. pa-

se-

ed-

dis-

nce.

ms.

rre-

ents.

Collect cash for small fees, and issue receipts. Set up payment plans for other charges.

Prepare monthly statements punctually, and mail them by the last day of each month.

Politely keep after slow-paying patients by phone or mail.

Prepare a monthly list of delinquent payers for the doctor to take action on if he chooses.

Record the bill-collection percentage for each month and year.

LABORATORY

Sterilize the doctor's instruments and gloves when necessary. Perform routine laboratory tests according to instructions. Give injections as authorized.

GENERAL

Regularly check and replenish the doctor's bag.

Order and check the receipt of medical and office supplies. See that laundry is sent and received at proper times.

Supervise the work of service personnel, such as repairmen, janitors, or maids.

Make sure that all rooms in the office are neat, clean, and ventilated.

even an experienced aide needs briefing in a new job.

Doctors have told me that all they want in an assistant is common sense. But common sense won't keep the appointment book in shape if the aide doesn't know how much time you normally need for a new patient and how much for a routine return visit.

Common sense won't tell her which patients are good payers and which are deadbeats. It won't inform her that you prefer "orthopaedic" to be spelled with the diphthong; that the name of the admitting officer at the hos-

A Bookshelf for Your Aide

Horace Cotton suggests the following list of volumes that will help your aide improve her usefulness to you:

OFFICE TECHNIQUES

HANDBOOK FOR THE MEDICAL SECRETARY. By Miriam Bredow. New York: Gregg Publishing Division, McGraw-Hill Book Co., 1959 IN THE DOCTOR'S OFFICE. By Esther Jane Parsons. Philadelphia: J. B. Lippincott Co., 1956

THE MEDICAL ASSISTANT. By Miriam Bredow. New York: The Blakiston Division, McGraw-Hill Book Co., 1958

THE MEDICAL ASSISTANT. By Frances L. Marold. Waterloo, Iowa: Professional Management, 1954

THE MEDICAL SECRETARY. By Kenneth B. Coffin and R. Forrest Colwell. New York: Macmillan Co., 1959

THE OFFICE ASSISTANT IN MEDICAL PRACTICE. By Portia M. Frederick and Carol Towner. Philadelphia: W. B. Saunders Co., second edition, 1960

PHYSICIANS' OFFICE ATTENDANTS MANUAL. By Henry B. Gotten and Douglas H. Sprunt. Springfield, Ill.: Charles C Thomas, Publisher, 1955

STANDARD HANDBOOK FOR SECRETARIES. By Lois Irene Hutchison. New York: Gregg Publishing Division, McGraw-Hill Book Co., 1956

B

th

U

F

ME

GU

Ro

MI

sio

pital is Janice Meriweather; that the disposable plastic syringes are to be used for children only; etc. Every new aide has to be given the ground rules.

On the other hand, good training can often make up for lack of education, experience, or even native ability. One doctor's aide once told me: "I've had only an average education. I didn't go to nurses' school. But the doctor I work for really trained me. And I feel that I do a good job." Her employer enthusiastically agreed.

A rundown on the appointments system, an explanation of Continued on page 126

WINNING WAYS WITH PATIENTS. Published by the A.M.A. Chicago: 1953

DICTIONARIES

elp

ew

B.

aki-

ro-

Col-

rick

ion.

and

her,

New

THE AMERICAN ILLUSTRATED MEDICAL DICTIONARY. By W. A. Newman Dorland. Philadelphia: W. B. Saunders Co., 1957 WEBSTER'S NEW COLLEGIATE DICTIONARY.

MEDICAL TERMINOLOGY

MANUAL FOR MEDICAL RECORD LIBRARIANS. By Edna K. Huffman. Berwyn, Ill.: Physicians' Record Co., 1955

MEDICAL TERMINOLOGY MADE EASY. By JeHarned. Berwyn, Ill.: Physicians' Record Co., 1953

STANDARD NOMENCLATURE OF DISEASES AND OPERATIONS. Edited by Richard J. Plunkett and Adaline C. Hayden. New York: Published for the A.M.A. by The Blakiston Division, McGraw-Hill Book Co., 1952 UNDERSTANDING MEDICAL TERMINOLOGY. By Sister M. Agnes Clare Frenay. St. Louis: Catholic Hospital Association, 1958

MEDICAL WRITING

GUIDE TO MEDICAL WRITING. By Henry A. Davidson. New York: The Ronald Press, 1957

MEDICAL WRITING. Morris Fishbein. New York: The Blakiston Division, McGraw-Hill Book Co., 1957

containing Oxethazaine a gastric mucosal anesthetic

OXAINE*

Oxethazaine in Alumina Gel, Wyeth

gastritis

an original development, backed by 5 years' research and clinical trial



Trademerk

A Century of Service to Medica

Oxame contains a gastric mucosal anesthetic for the relief of pain of gastritis.

Oxame is indicated in the many patients who do not respond to diet, antacids and anticholinergies.

As reported in J.A.M.A., OXAINE brought complete relief to 96% of 92 gastritis patients suffering substernal pain and upper abdominal distress. *Deutsch, E., and Christian, H.J.: J.A.M.A.* 169:2012 (April 25) 1959.

Oxame provides sustained anesthesia over many hours, unaffected by ebb and flow of gastric contents.

Oxethazaine, the mucosal anesthetic in Oxaine, is 4000 times more potent topically than procaine. Safe, not a "caine." Only two known cases of sensitivity (glossitis) occurred in extensive clinical trials.

Easily administered, simple dosage—just 2 teaspoonfuls 15 minutes before meals and at bedtime.

Bland, noncloying over long-term administration.

related disorders

indigestion
nausea and vomiting
dyspepsia
esophagitis
duodenitis
irritable bowel
spastic colon
heartburn

How OXAINE Relieves Pain, Hastens Recovery

Gastric mucosa can heal more quickly, because local anesthetics inhibit acid and pepsin secretion, by preventing release of gastrin from the antrum of the stomach.

Patients tolerate a more varied diet and a larger amount of food—and, because of Oxaine, enjoy their food without fear of pain following meals.

They feel free of bloating and the disturbing sensation of fullness when only a little food has been ingested—because the anesthesia of Oxaine desensitizes irritated nerve receptors.

Those with irritable bowel syndrome are spared the embarrassing urge to defecate during meals—because Oxaine diminishes the exacerbated gastrocolic reflex.

Supplied: In bottles of 12 fluidounces.

Wyeth Laboratories Philadelphia 1, Pa.

the filing routine, a few basic instructions about ordering and caring for supplies—these things shorten the period of suffering that employer and raw employe must both undergo. With such things in mind, here's the advice I gave Dr. Russell:

'Tell Her What to Do'

"Brief Mrs. Johnson on how to handle every type of telephone call. Tell her whether she should make appointments for new patients without checking with you, and under what circumstances. What about requests for house calls? What's an emergency in your way of thinking, and what isn't? When is your best time for seeing detail men, charity solicitors, and local bigwigs?

"Tell her that if she follows your instructions and runs into trouble, you'll stand up for her. Make her feel like more than just another office fixture. In other words, put her on your team."

I noticed a glint of mischief in the doctor's eyes. So I added hastily, "Remember, you can be friendly without being palsy-walsy. Think of your aide as a working extension of your professional self. But note that I emphasize the word *working*."

I told Dr. Russell that I'd suspected he was falling into the habit of doing too much himself toward the end of Trudy's regime. He'd seemed always to be answering the phone, bustling into the reception room to summon patients, rummaging through the files for charts. He'd been doing Trudy's job.

"You know, I don't believe I broke Trudy in properly, either," the doctor admitted. So I quoted to him the advice given to a physician some years ago by the late Henry C. Black, a well-known management consultant: "You won't stop running around in circles until you do stop running around in circles."

"Just what does that mean?" Dr. Russell asked.

'Then Let Her Do It'

"It means that after you've taught Mrs. Johnson what to do, you should let her do it," I replied. "Of course, the teaching comes first. But after you've explained how you like your work Th

mato Now,

hand: areas

chlor

FORM! (TARB residu

Also o

The efficacy of tar steroid therapy—applied with the gentleness of a breeze!



In acute, subacute and chronic dermatoses

NEW TARCORTIN®AEROSOL

The effectiveness of TARCORTIN in a wide range of dermatoses has been shown in numerous published studies. 1-7 Now, the aerosol form offers these additional advantages: hands never touch affected surface/reaches inaccessible areas easily/provides instantly cooling relief/hexachlorophene for sustained antibacterial activity/economical for the patient.

FORMULA: Hydrocortisone 0.5%; Special Coal Tar Extract TARBONIS®) 5.0%; Hexachborophene 1.0%, in 7 grams apray residue. 95 gram aerosol container, on prescription only.

Also available: TARCORTIN Cream and Lotion, NEO-TARCORTIN *M. Ointment

References: 1, Bleiberg, J.: J. M. Soc. New Jersey 53:371, 1956.
J. Clyman, S. G.: Postgrad. Med. 21:300, 1957. 3. Weish, A. L. and Ede, M.: Ghio State M. J. 50:837, 1954. 4. Abrams, B. P. and Shaw, C.: Clin. Med. 3:839, 1956. 5. Weish, A. L. and Ede, M.: J.A.M.A. 166:156, 1958. 6. Weish, A. L. and Ede, M.: J.S.:805, 1959.
J. Clyman, S. G.: Ind. Med. & Surg., 27:531, 1958.



REED & CARNRICK Kenilworth, New Jersey



Treatment without touch

n

re

ıg

X-

rk

the filing routine, a few basic instructions about ordering and caring for supplies—these things shorten the period of suffering that employer and raw employe must both undergo. With such things in mind, here's the advice I gave Dr. Russell:

'Tell Her What to Do'

"Brief Mrs. Johnson on how to handle every type of telephone call. Tell her whether she should make appointments for new patients without checking with you, and under what circumstances. What about requests for house calls? What's an emergency in your way of thinking, and what isn't? When is your best time for seeing detail men, charity solicitors, and local bigwigs?

"Tell her that if she follows your instructions and runs into trouble, you'll stand up for her. Make her feel like more than just another office fixture. In other words, put her on your team."

I noticed a glint of mischief in the doctor's eyes. So I added hastily, "Remember, you can be friendly without being palsy-walsy. Think of your aide as a working extension of your professional self. But note that I emphasize the word working."

I told Dr. Russell that I'd suspected he was falling into the habit of doing too much himself toward the end of Trudy's regime. He'd seemed always to be answering the phone, bustling into the reception room to summon patients, rummaging through the files for charts. He'd been doing Trudy's job.

"You know, I don't believe I broke Trudy in properly, either," the doctor admitted. So I quoted to him the advice given to a physician some years ago by the late Henry C. Black, a well-known management consultant: "You won't stop running around in circles until you do stop running around in circles."

"Just what does that mean?"

Dr. Russell asked.

'Then Let Her Do It'

"It means that after you've taught Mrs. Johnson what to do, you should let her do it," I replied. "Of course, the teaching comes first. But after you've explained how you like your work

126 MEDICAL ECONOMICS · MAY 23, 1960

The efficacy of tar-steroid therapy—applied with the gentleness of a breeze!



In acute, subacute and chronic dermatoses

NEW TARCORTIN® AEROSOL

The effectiveness of TARCORTIN in a wide range of dermatoses has been shown in numerous published studies.\(^1\)-7 Now, the aerosol form offers these additional advantages: hands never touch affected surface/reaches inaccessible areas easily/provides instantly cooling relief/hexachlorophene for sustained antibacterial activity/economical for the patient.

FORMULA: Hydrocortisone 0.5%; Special Coal Tar Extract (TABBONIS®) 5.0%; Hexachlorophene 1.0%, in 7 grams spray residue, 95 gram aerosol container, on prescription only.

Also available: TARCORTIN Cream and Lotion, NEO-TARCORTIN T.M. Ointment

References: 1, Bleiberg, J.: J. M. Soc. New Jersey 33:371, 1956.
2. Clyman, S. G.: Postgrad. Med. 21:309, 1957. 3. Welsh, A. L. and Ede, M.: Ohlo State M. J. 50:637, 1954. 4. Abrams, B. P. and Shaw, C.: Clin. Med. 2:839, 1956. 5. Welsh, A. L. and Ede, M.: J.A.M.A. 166:158, 1958. 6. Welsh, A. L. and Ede, M.: J. S. 180. 1959. 7. Clyman, S. G.: Ind. Med. 4: Surg., 27:531, 1958.



REED & CARNRICK Kenilworth, New Jersey



Treatment without touch

organized, hand over the appointment book to Mrs. Johnson as a solemn assignment. Let her arrange all your hospital admissions and schedule all your surgery, once she can do these things.

"Turn over to her all the insurance paper work—except for the signing of forms—as soon as you're sure she knows how to file different types of claim. Put her in complete charge of collections as soon as she understands your wishes concerning slow pays and no-pays.

"If she doesn't know how to do a particular job, sit down and show her. Bring in your accountant if she's shaky on the books. If her lab technique needs to be sharpened, send her over to the hospital. If she's new to insurance work, ask the local Blue Shield people and commercialinsurance agents to drop in and



"I just knew it, Miss La Tour. The love scenes in your last movie had such . . . such verisimilitude,"



You can prescribe gentle control of blood pressure with

BUTISERPINE®

Butiserpine contains just enough reserpine (0.1 mg. per tablet or teaspoonful) to reduce tension without initiating side effects; 15 mg. of BUTISOL sodium[®] butabarbital sodium, to promote calmness without lethargy.

Butiserpine Tablets, Elixir,
Prestabs[®] Butiserpine R-A (Repeat Action Tablets)

McNEIL

McNEIL LABORATORIES, INC. Philadelphia 32, Pa.

tutor her. They'll be glad to help out."

"That would have helped Trudy, too," mused Dr. Russell.

"You see, once you've given Mrs. Johnson a chance to learn the job properly, you can insist on her doing it properly," I went on. "Don't let her get away with anything that's slipshod, especially in record-keeping. If you do, she'll assume you're satisfied with less than good work. The words 'Do it over, please' are important."

List Her Duties?

"What do you think of giving her a written list of her duties?" asked Dr. Russell.

"That would be fine if you employed more than one girl," I said. "But a new girl's likely to think she's not expected to do anything that isn't listed. Frankly, in a one-girl office a list of duties is probably less valuable than a list of important dates, like tax-filing dates."

"All the same, I'd like to see a sample list of an aide's duties," said my doctor-friend.

So I made one up for him. (It

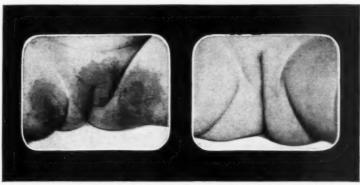
appears here in boxed form, in case you want to pass it on to your aide after revising it to suit your own office routine.)

"I believe that's going to be a big help," Dr. Russell told me. "But when I start thinking about it, no list would have solved the worst problem I had with Trudy. What can a doctor do about his aide's spelling?"

"That's not an easy one," I admitted. "Your best bet is to spell out all the unusual words—medical and nonmedical—until you're sure she has them right. Don't tear your hair when she turns your carefully enunciated 'auricular fibrillation' into 'oricular feeble ration.' Encourage her to come and ask for help when she's floored. It's better than leaving her to search frantically through the dictionary or your reference books.

"That reminds me," I added.
"I've noticed that you've got a
lot of medical reference books in
your consultation room, as most
doctors do. Why don't you set up
a little library for Mrs. Johnson,
too?"

"I'll be happy to," he agreed,



Before application of White's Vitamin A & D Ointment—Typical diaper rash with exceriation of skin.

After application of White's Vitamin A & D Ointment at every diaper change — Diaper rash has completely disappeared within one week.

Heal and Prevent Diaper Rash with White's Vitamin A&D Ointment

Apply at Every Diaper Change HEALS • SOOTHES • PROTECTS

also beneficial for – Pressure Sores, Varicose and Chronic Ulcers; Nipple Care (fissured nipple); Episiotomy and Circumcision Wounds; Eczema, Detergent Dermatitis; Minor Burns and Wounds and Skin Abrasions.

Supplied in $1\frac{1}{2}$ and 4 oz. tubes; 1 lb. "nursery" jars and 5 lb. "ward" containers.

WHITE LABORATORIES, INC.



KENILWORTH, N.J.

MEDICAL ECONOMICS - MAY 23, 1960 131

il

r

n y ır

d.

a

st

ip n,

d.

somewhat glumly. "Just suggest some titles."

I gave him a list. Most of the books on it were merely hand-books—medical or secretarial, or both. Yet I felt that each could increase an aide's usefulness to her physician-employer. (The list appears elsewhere in these pages.)

A.A.M.A. a Help

But I hadn't finished yet. "One other thing," I said. "I hear that the American Association of Medical Assistants is forming a local chapter. Why don't you get Mrs. Johnson to enroll in it? You'd have to pay her membership dues, of course."

"What in the world good would that do?" Dr. Russell wanted to know.

"I can't promise anything," I explained. "The outfit usually doesn't have a set study schedule. Often, the aides just get together with some physicians, lawyers, and insurance men and plan a program. But some chapters of the A.A.M.A. have given their members a lot of help.

"Let me tell you about a good

example I heard of in Oklahoma last year. The A.A.M.A. chapter in the town I was visiting had worked up all sorts of courses. They included training in personal appearance and grooming, telephone technique, business procedures, bookkeeping, collections, office nursing duties, medical terminology, and medicolegal matters. Each course consisted of eight sessions, most of them two hours long. And everyone told me they were well worth the time."

Local Courses

Dr. Russell suddenly sat up. "Now that I think of it, our city schools do something very similar!" he exclaimed. "They offer all sorts of evening classes for medical aides: insurance, credit and collections, laboratory theory and practice, medical terminology, medical stenography, and that sort of thing."

"Seems to me Mrs. Johnson would appreciate *either* type of course," I declared.

"Do you have any more helpful hints to give me before you start your long drive home?" the



TARGET ACTION

specifically on the large bowel

DORBANE selective peristaltic stimulant · smooth, overnight action · no griping · well tolerated, non-habituating
Available in 75 mg. scored tablets and suspension.

Double-strength capsules for maximum economy and convenience.

For lower dosage and in children.

Available in capoulos and suspension.

minate. He mp. P



doctor asked, as I rose to leave.

"I'll give 'em to you fast," I said. "Teach Mrs. Johnson to put first things first. See that she doesn't get tangled up with trivial tasks while you're in need of her assistance. She can put those jobs off for the hours when you're at the hospital.

"And don't let her take short cuts in record-keeping. For example, insist that she make full entries on patients' account cards. A partial entry today means extra work tomorrow.

"Lastly, take your aide's prob-

lems very seriously during her first weeks with you. If you listen to her questions with only half an ear, she'll stop asking them—and she may bury each new problem in a desk drawer. Before long, then, they'll all sneak out to haunt you."

As I prepared to drive away, I rolled down my car window. "One more thing, Doctor," I called out. "Don't tell Mrs. Johnson to use her common sense about some problem or other that you don't know the answer to!"

more than just a lubricant ... assured, safe'

RELIEF

RECTAL MEDICONE

"break-back" box of 12

SUPPOSITORIES

& UNGUENT

1½ oz. tube w/applicator



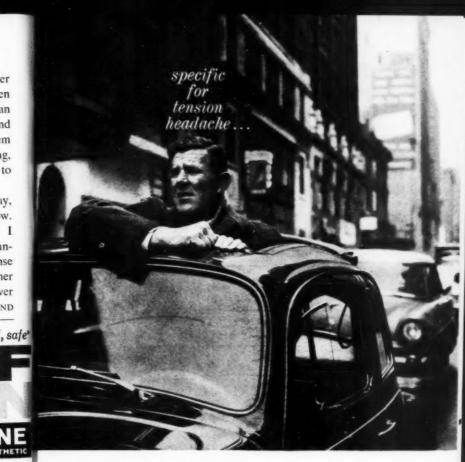
Conservative conjunctive therapy in simple internal - external hemorrhoids; heals-relieves itching - lubricates - protect

*Contains no narcotic to conceal serious rectal pathology

MEDICONE COMPANY

-foremost in the field of anesthetic anorectal therapy 225 VARICK ST., NEW YORK 14, N.Y.

134 MEDICAL ECONOMICS · MAY 23, 1960



FIORIVAL relieves pain, muscle spasm,

nervous tension

rapid action · non-narcotic · economical

"We have found caffeine, used in combination with acetylsalicylic acid, acetophenetidin, and isobutylallylbarbituric acid, [Fiorinal] to be one of the most effective medicaments for the symptomatic treatment of headache due to tension." Friedman, A. P., and Merritt, H. H.: J.A.M.A. 163:1111 (Mar. 30) 1957.

Fiorinal Tablets-Each tablet contains: Sandoptal (Allylbarbituric Acid N.F. X) 50 mg. ($\frac{4}{3}$ gr.), caffeine 40 mg. ($\frac{4}{3}$ gr.), acetylsalicylic acid 20 mg. (3 gr.), acetophenetidin 130 mg. (2 gr.). Dosage: 1 or 2 tablets every 4 hours, according to need, up to 6 per day.



herapy

ernal ; heals-

ng protects

thology

rapy

er en an

nd m ıg, to

ıy, W. I ınise ner ver ND contracts the uterus,
speeds involution,
and prevents
postpartum hemorrhage

ERGOTRATE® MALEATE

Ergotrate Maleate almost completely eliminates postpartum hemorrhage due to uterine atony. Administered during the puerperium, it increases the rate, extent, and regularity of uterine involution; decreases the amount and sanguineous character of the lochia; and decreases puerperal morbidity due to uterine infection. Ergotrate Maleate is available in 1-cc. ampoules of 0.2 mg. and in tablets of 0.2 mg.

Ergotrate® Maleate (ergonovine maleate, Lilly)

ELI LILLY AND COMPANY . INDIANAPOLIS 6, INDIANA, U.S.A.



059000



No More for Me!

A concept that's dear to many doctors proved nothing but a pain to this man. Here he tells how he has found a workable alternative to the unworkable telephone hour

By Stanley I. Wolf, M.D.

There's no more irritating, nerve-racking part of medical practice than the telephone hour. I tried it, gave it up, and am better off without it.

I know these may sound like revolutionary statements to some doctors. A number of my colleagues have a specified daily period during which patients are encouraged to call and discuss their problems. The idea is that, with calls thus concentrated, there will be fewer interruptions at other times.

On the surface, the idea seems fine. I thought it first-rate when I adopted it a few years ago. But here's what I soon discovered: Far too many patients, prompted by the knowledge that the doctor is sitting at his phone, actually create problems to discuss.

For example, listen to this phone conversation that once

Continued on page 140

THIS ARTICLE has won one of the 1960 MEDICAL ECONOMICS Awards for its author, a pediatrician in Silver Spring, Md.

NO SPRAIN, NO STRAIN, OR LOW BACK PAIN

OF BOTH SPASM AND ITS PAIN

Rela is most useful in the areas where narcotic analgesics are unwarranted and where salicylates are inadequate. Its muscle-relaxant properties are dependable yet significantly free of the limitations or problems often associated with other relaxants.

*MYOGESIG: MUSCLE RELAXANT



TELEPHONE HOURS? NO MORE FOR ME!

took place between a woman and me:

"Doctor, my 2-month-old finished her bottle an hour ago, and I don't know what to do."

"What are you worried about?"
"No burp!"

It Builds Up

Such calls—and the more justified ones—are no problem for a doctor just starting in practice. At first, a telephone hour that's literally one hour long is sufficient to handle the volume of calls. Not only does it reduce interruptions during office hours; it helps the doctor formulate his schedule for house calls, hospital visits, etc., during the day.

But as a practice grows, one hour becomes inadequate. Many physicians then resort to setting aside an hour both morning and evening. Even so, a patient frequently has to dial over and over again before getting through.

For some, it's a real achievement to get a call in during the period. One patient informed me that she used to take a tranquilizing tablet before starting to dial. Another one complained: "What am I supposed to do when I'm trying to cook breakfast for my husband and get the children ready for school? I can't sit by the phone for an hour trying to reach you." And she was right!

My telephone hour (which I held at home, not at the office) was supposed to end at 8:30 a.m. How many times did a patient call at 8:29 with a question requiring a ten-minute discussion! This cut the usual two minutes allotted to my "relaxed" breakfast down to a single gulp of coffee followed by a frantic rush to the door.

All-Day Telephone Hour

If the call hour had reasonably reduced the number of incoming calls the rest of the day, I would have considered the pre-breakfast session as time well spent. But with a busy practice, the calls that can be handled in one hour take care of only a small proportion of the patients who want to call. So when my office hours started, at 9 o'clock, the telephone did, too!

The irony of it was that by 9

Continued on page 141



how does Mellaril differ from other potent tranquilizers?



Mellaril

provides highly effective tranquilization, relieves anxiety, tension, nervousness,

but is virtually free of such toxic effects as

jaundice



Parkinsonism blood dyscrasia dermatitis

greater specificity of tranquilizing action results in fewer side effects



"Thioridazine [Mellaril] is as effective as the best available phenothiazine, but with appreciably less toxic effects than those demonstrated with other phenothiazines....This drug appears to represent a major addition to the safe and effective treatment of a wide range of psychological disturbances seen daily in the clinics or by the general practitioner."*

Supply: MELLARIL Tablets, 10 mg., 25 mg., 100 mg.

A.M. my nurse was on duty. She -like any good pediatric nurse -could have handled many of the calls. But my personally conducted telephone hour trained my patients to think otherwise. They were in the habit of talking to me during the allotted period, and they saw no reason to talk to anyone else at any other time.

This situation led to its own solution: The call hour had to go. I inquired around and found that several of my colleagues had previously arrived at the same decision. One doctor had installed an automatic recording machine that invited a telephoning patient to leave his name so that the nurse could return the call. Another man had simply arranged for his nurse to come in earlier and take over the telephone hour.

I hit on my own plan: I simply discontinued the home telephone hour and told patients they should feel free to call the office at any time. Then I told my nurse to handle routine queries in her own efficient way.

I gave up my phone hour on

the first day of July. This seemed a logical time to begin the re-education of my patients, since calls are fewer during the summer. My phone number at home was changed. By arrangement with the telephone company, all calls to the old number were thereafter referred to the office number.

Re-educating Patients

A patient who called my office when no one was there was connected with my answering service, which relayed emergency calls to me at once. Routine calls were held for the nurse. In returning each call (at her very earliest convenience), she would then explain that the telephone period wasn't adequate to handle all the calls. She would urge the callers to forget the old "hour" and to feel free to call at any time. And she wouldn't add that the change had been made as a convenience to me. She would say-with equal truth-that it was the answer to patients' complaints about the old system.

With my reform presented in this light, patients have readily

Continued on page 144

FOR SIMULTANEOUS IMMUNIZATION AGAINST 4 DISEASES:

PEDI-ANTICS



TETR

now you can immunize against more diseases...with fewer injections

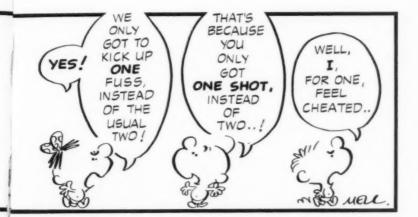


Dose: 1 cc.

Supplied: 9 cc. vials in clear plastic cartons. Package circular and material in vial can be examined without damaging carton. Expiration date is on vial for checking even if carton is discarded.

TETRAVAN IS A TRADEMARK OF MERCE & CO., INC.

Poliomyelitis - Diphtheria - Pertussis - Tetanus



AVAX.

Diphtheria and Tetanus Toxoids with Pertussis and Poliomyelitis Vaccines

For additional information, write Professional Services, Merck Sharp & Dohme, West Point, Pa.



MERCK SHARP & DOHME, DIVISION OF MERCK & CO., INC., WEST POINT, PA.

M

TELEPHONE HOURS? NO MORE FOR ME!

accepted it. They like being told that they're welcome to call at any time—which many of them were doing anyway. And they've quickly learned to talk willingly with my nurse. She's able to take care of the majority of the calls, as she could have all along. But, of course, she's trained to refer anything that's beyond her ken to me.

For a while I was afraid that patients would begin calling in the evening, so as to detour around the nurse. It hasn't worked out that way. Probably the secret is my nurse's ability to discuss the usual problems so understandingly that callers often feel no need to reach me personally.

As important as her factual knowledge is her telephone technique. She makes sure the patient feels that his call is welcome—and that he's welcome to call again, about even the smallest problem.

She's also careful never to let a worried mother get the impression that it's impossible to talk to the doctor directly. Even though



IN EPISTAXIS

"PREMARIN"

the physiologic hemostat

ARRESTS BLEEDING



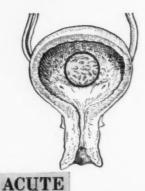
AYERST LABORATORIES

A single injection of "PREMARIN" INTRAVEnous was effective in over 90 per cent of 641 cases of epistaxis—usually within 20 to 60 minutes.²

Over 1,000,000 injections have been given to date without a single report of toxicity or production of thrombi—in control of spontaneous hemorrhage and suppression of bleeding during and after surgery of every type.

"PREMARIN" INTRAVENOUS (conjugated estrogens, equine) is supplied in packages containing one "Secule" a providing 20 mg., and one 5 cc. vial sterile diluent with 0.5%, phenol U.S.P.





CYSTITIS

Responds Rapidly to Antiseptic, Soothing

URISED

SIMPLE, ACUTE or isolated urinary tract infections readily yield to antibacterial-spasmolytic URISED. Acute cystitis or urethritis symptoms vanish within three days... urine clears within five to ten days.

No side effects were reported in recent evaluations of URISED in over 200 cases. On the contrary, URISED is soothing, relaying to the urinary visceral muscles.

laxing to the urinary visceral muscles. URISED controls pain while normalizing urination and producing attisepais. Each URISED tablet contains: atropine sulfate 1/2000 gr.; plyoscyamine 1/2000 gr.; gelsemium, methenamine, methylene blue, benzoic acid, salol.

For starter prescription supplies for many patients just send this coupon.

5547 N. Raver Chicago 40,		ME-5
	Re: Starter Rx	Supply
Dr.		
DI		
Address		

TELEPHONE HOURS

the question may be trivial in the nurse's opinion, her voice implies otherwise. She gets across the idea that she's glad to help, and that if it turns out to be necessary, the doctor will be glad to help, too.

Granted, I couldn't have given up the telephone hour if my aide had been less competent. But if your nurse is as efficient and as intelligent as mine, just try my system.

Instead of a crammed hour on the phone that's likely to frustrate both you and your patients, you'll have the satisfaction of getting more accomplished throughout the day. And your patients, knowing the wires are always open, may well become less demanding.

laughable

If this word describes an experience you've had in the course of your practice, why not share the story? For each anecdote accepted, MEDICAL ECONOMICS pays \$25 to \$40. Address: Anecdotes, Medical Economics, Inc., Oradell, N.J.

nose that stopped history

...and
when your
patient's history
is a "stopped" nose

DEMAZIN

formerly CHLOR-TRIMETON Compound contains whorprophen pyridamine maleate and phenylephrine

In colds, sinusitis, allergic or vasomotor rhinitis...prolonged nasal decongestion by mouth without topically caused rebound

supplied as

REFETARS: Each DEMAZIN REFETAR contains 4 mg, chlorprophenpyridamine maleate (Chlora-Transtons Maleate) and 20 mg, phenylephrine equally divided between outer layer and timed-release inner core; bottle of 100.

Syrup: Each tesspesonful (5 cc.) of DEMAZIN Syrup contains 1,25 mg, chlorprophenpyridamine malfate and 2.5 mg, thenylephrine hydrochloride; bottles of 16 cz. and 1 gallon.

Because the nose of Justinian II was cut off by rebellious subjects, this bloodthirsty East Roman Emperor had it replaced with a nose of gold. His gesture of cleaning his golden nose, it was said," meant each time that another subject was downed to die.

REPETARS 8 Repeat Action Tablets.

SCHERING CORPORATION . BLOOMFIELD, N. J.

Schering

5-110



SYMPTOMATIC RELIEF IN 96% OF PATIENTS TREATED* WYANOIDS* HC

Rectal Suppositories with Hydrocortisone, Wyeth

- · pruritus ani
- proctitis
- · postoperative inflammatory reactions
- · chronic ulcerative colitis
- · irradiation proctitis

*Schneider, H.C.: In Press, J. Intern. Coll. Surgeons



A Century of Service to Medicine Supplied: Suppositories, boxes of 12. Each suppository contains 10 mg. hydrocortisone acetate, 15 mg. extract belladonna (0.19 mg. equiv. total alkaloids), 3 mg. ephedrine sulfate, zinc oxide, boric acid, bismuth oxyiodide, bismuth subcarbonate, and balsam peru in an oleaginous base.

Wyeth Laboratories Philadelphia 1, Pa.

Invest in Office-Equipment Stocks?

There's money to be made on automation. But you'd better consider these key calculations of the industry's prospects before you invest in the companies that build those big machines

By Betty Fiala

It's a rare investor who hasn't wished he could cash in on the phenomenal recent growth of the office-equipment industry. Mention automation, and the stockmarket-conscious American sighs dreamily: "Ah! If only I'd bought IBM back when . . ."

He can't be blamed for sighing. The latest annual report of International Business Machines shows what has happened in the past decade. In 1950, the company's gross income was about \$215,000,000; last year, IBM grossed almost \$1.4 billion. Its working capital—nearly \$24,-000,000 in 1950—has soared to roughly \$416,000,000. Its total assets have risen from \$305,-000,000 to \$1.3 billion.

This dramatic corporate growth has been paralleled by a rise in IBM Common. It's now known as Wall Street's "king of Continued on page 152

In spite of the enormous growth of the pharmaceutical industry and the tremendous investment that drug manufacturers put into research, the chances of their developing really new drugs that act along new principles . . . remain very small indeed. As a result only a very small fraction of the new preparations that are marketed each year represent such truly new drugs.

New England J. Med., Dec. 3, 1959, p. 1190.

Maltbie Laboratories is proud to announce such a truly new chemical entity: 1-maminophenyl-2-pyridone. Its name...

Dornwal

for treatment of anxiety and tension without causing drowsiness

therapeutically outstanding: effectively interrupts tension headache / relieves acute emotional upsets / does not produce depression or depersonalization / is well suited to ambulatory patients / is virtually devoid of hypnotic or sedative activity / patients remain alert without undue stimulation /

MALTBIE LABORATORIES DIVISION Wallace & Tiernan Incorporated Belleville 9, New Jersey
150 MEDICAL ECONOMICS · MAY 23, 1960

a tranquilizer with minimal side effects: Look at the dramatically low incidence in an unselected group of 593 patients...

Symptoms	Patients	Symptoms	Patients
Drowsiness	9	Tinnitus	1
Sedation	2	Stimulation	3
Nausea	7	Insomnia	1
Pruritus	2	Dry mouth	8
Blurring	4	Exanthema	2
vision		Tremor	3

DROWSINESS WAS MINIMAL

(only 9 out of 593 patients: less than 2% ... statistically not significant)

Prescribe Dornwal for your next patients who need a tranquilizer but cannot afford to be drowsy. Write for your trial supply.

Indications: anxiety and tension, various types of psychoneuroses, tension headache, menopausal syndrome, alcoholism, premenstrual tension, behavior problems in children.

Dosage: One or two 200 mg. tablets three times a day. Children, one or two 100 mg. tablets two times a day. Administration limited to three months duration.

Supply: 200 mg. yellow scored tablets, and 100 mg. pink tablets, each in bottles of 100 and 500.

No absolute contraindications to the use of Dornwal are known. There have been no reports or evidence of habituation, addiction or drug tolerance in animal or clinical studies. Dornwal has proved to be relatively free from untoward effects when administered at recommended dosage.

References: 1. Landis, C.; Whittier, J. R.; Dillon, D., and Link, R.: Clinical findings and psychophysiological tests of the effects of a new psychopharmacologic agent: Dornwal, Am. J. Psychiat. 116;747 (Feb.) 1960.

2. Litchfield, H. R.: Aminophenylpyridone, a new mood-stabilizing drug, Arch. Pediat., in press. 3. Cass, L. J.; Frederik, W. S., and Teodoro, J.: Evaluation of Calmative Agents: Revision of methods, Am. Pract. & Digest Treat., in press. 4. Nodine, J. H.; Bodi, T.; Levy, H. A.; Siegler, P. E., and Moyer, J. H.: The use of amhenidone as an ataractic agent in outpatients, American Federation for Clinical Research, New Orleans, Jan., 1960. 9. Cantelmo, A. L.: Clinical evaluation of aminophenylpyridone as a new drug for stabilizing emotional behavior, Current Therap. Res. 2:72 (Feb.) 1960.

Dornwal

Dornwal

PDL-02

INVEST IN OFFICE-EQUIPMENT STOCKS?

the growth stocks." Suppose you'd invested in five shares of IBM in January, 1950, at a cost. of \$1,065. What with stock splits, stock dividends, cash dividends, and the higher market value, your original investment would have been worth \$12.966 by March of this year.

More than anything else, it's the IBM success story that has made office-equipment stocks among those most talked about on Wall Street and off. But what about lesser members of the family? Is the industry in general a good bet for the doctor-investor?

The fact remains that no other maker of office machines has come anywhere near matching the IBM record. True, almost all of them have been growing stead-

Everything's Automatic Except Earnings

The nation's office-equipment makers have been having their ups and downs, as shown by this four-year earnings record of ten leading firms. The main exception is International Business Machines, whose earnings have risen with almost automatic regularity.

	Earnings Per Share			
	1936	1957	1958	1959
Addressograph-Multigraph	\$2.781	\$2.801	\$3.241	\$3.22
American Photocopy	.701	.741	$.90^{1}$	1.421
Burroughs Corp.	2.35	1.67	.97	1.07
Dictaphone Corp.	4.15	4.59	2.14	3.00
Haloid Xerox	.401	.461	.491	601
International Business Machines	3.70^{1}	5.151	7.10^{1}	7.971
National Cash Register	2.62	2.57	2.19	2.52
Pitney-Bowes	1.05^{1}	1.02^{1}	1.07^{1}	1.011
Royal McBee	3.47	2.68	.052	.62
Smith-Corona Marchant	2.16^{1}	1.38^{1}	.30	N.A.3

¹Adjusted for stock splits and dividends. ²Deficit. ³Not available.

when they're pregnant they "forget" on purpose

Iron therapy is anathema to pregnant womenand understandably so. They are apprehensive of the unpleasant side effects so common with conventional iron tablets and capsules. Little wonder pregnant patients are notorious for "forgetting" to take their iron.

Since 'Feccol' Spansule capsules virtually eliminate side effects, and since in most cases—the daily desage is only one capsule, the chance of G.I. discrete and "forgotten" does is reduced to a minimum.

FEOSOL® SPANSULE®

brand of ferrous suifate brand of sustained telepar sup-

the superior presentation

SMITH KLINE & FRENCH

INVEST IN OFFICE-EQUIPMENT STOCKS?

ily in corporate size. But the earnings of most have been anything but stable, as a look at the accompanying table will show.

Not a Stable Field

This doesn't mean that the stocks of other office-equipment manufacturers are bad buys. But it does indicate that you'd better think twice before putting money into any major company except IBM. And if you're looking for real stability, you might do better in an entirely different field. Let's see why:

As you probably know, IBM was among the first to develop data-processing equipment. IBM contributions include the basic punched-card accounting system and one of the first calculators to add, subtract, multiply, divide, "memorize," and collate information in the flash of an electronic eye. As a pioneer in the field, the company now enjoys a comfortable edge on its competitors.

Those competitors include scores of companies that manufacture office equipment, many of them small and specialized. Only nine or so are considered to be in the general computer field. Among them are Sperry Rand (whose Remington-Rand division makes office machines), Burroughs Corp., National Cash Register, and Radio Corporation of America.

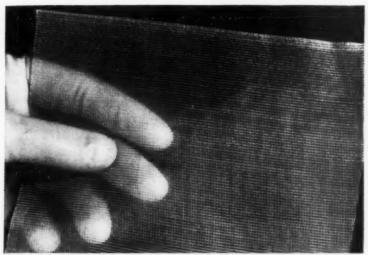
Altogether, the computermakers sold or leased about \$1.5 billion worth of data-processing systems last year. But IBM still has the lion's share of all the business. Moreover, it's the only office-equipment company that has been able to show a real profit in this area.

Why IBM's Ahead

That's primarily because dataprocessing is such a highly technical field. In order to compete with IBM, other companies have had to spend vast sums of money for research and development. It takes time for such expenditures to pay off. And sometimes they turn out to be just so much money down the drain. Underwood Corp. is an example. The old-line typewriter maker has just reported its fourth deficit year in a row,

Continued on page 158

A MONOFILAMENT POLYETHYLENE PLASTIC MESH WITH EXCEPTIONAL PROPERTIES AND STRENGTH



USHER'S MARLEX MESH BY DAVOL

Marlex is a high-density polyethylene plastic recently developed by the Phillips Chemical Company. It has a highly crystalline molecular structure affording an unusually high tensile strength – from 50,000 to 150,000 lbs. p.s.i.

- Nonwettable
- · Outstanding Chemical Resistance
- · Minimal Fragmentation
- Nontoxic
- · Thermostable up to 250° F.
- · Soft, porous, pliable
- · Inert in presence of Infection
- · Low Tissue Reaction

Marlex mesh is a simple taffeta weave of pure Marlex monofilament, calendered to give more flexibility. It is available in two sizes: 1½" x 3½" and approximately 6" x 12".

- Packaged in a double plastic envelope.
 Remains sterile until outer envelope is broken.
- Can be resterilized by boiling for thirty minutes or by chemical sterilization prior to use.
- Can be cut to desired pattern at operating table.
- Cut edge can be fused with the actual cautery at low heat. Sutures may be placed within ½" of the fused edge.
- Can use silk, cotton or wire sutures (stainless steel wire sutures are recommended).



RUBBER COMPANY

DEPT. MI. PROVIDENCE, R. I.

MEDICAL ECONOMICS - MAY 23, 1960 155



HOW TO GET MORE

IF YOU WANT TO FIND ...

the brand name of a drug

the manufacturer's name

essential product information; composition, action & uses, administration, dosage, precautions, contraindications, how supplied, literature available

a drug with a particular pharmacological action

a drug with a particular major ingredient

a drug with a particular therapeutic indication

generic name of a brand name drug

OUT OF YOUR 1960 PDR

the manufacturer's name

Pink Section, Part II: Alphabeti-

	cal Index by Manufacturers.		
its generic name	Yellow Section: Drug, Chemical, and Pharmacological Index*		
the drug's brand name	Pink Section, Part I: Alphabeti- cal Index by Brand Names*		
the drug's generic name	Yellow Section: Drug, Chemical, and Pharmacological Index*		
the drug's brand name	Pink Section, Part 1: Alphabeti- cal Index by Brand Names*		
the pharmacological action	Yellow Section: Drug, Chemical, and Pharmacological Index*		
the major ingredient	Yellow Section: Drug, Chemical, and Pharmacological Index*		
the therapeutic indication	Blue Section: Therapeutic Indi- cations Index*		
the drug's brand name	Pink Section: Part I, Brand name index. Generic name will be found under "Composition" in White Section.		

[•]In the Pink, Yellow, and Blue Sections, the page number following the drug name refers to the page in the White Section where the drug is comprehensicely described. If no page number is listed, the drug is not described in the White Section.

INVEST IN OFFICE-EQUIPMENT STOCKS?

largely because of an abortive attempt to move into the dataprocessing field.

Of course, IBM continues to make even larger outlays than the others for expansion, for research, and for development. So it has kept on increasing its already impressive lead in both sales and profits.

Then why are the other major office-equipment makers deep in an undertaking that's so expensive and so comparatively unpromising for them? Why aren't they satisfied with the large and growing market for conventional products like typewriters and adding machines?

The reason seems to be that



there's no longer much real profit in such machines. To ignore electronic computing would be to take the risk of falling far behind in one of the most competitive industrial races this century has seen.

Others Have a Chance

Some Wall Street analysts do feel that IBM may not continue to hold its present percentage of the market through the 1960s. The competing companies will have to absorb further losses before they gain a real foothold, such analysts point out. But the growth potential of automated business systems is enormous. So IBM's rivals may be able to achieve eventual success by concentrating on smaller, special-purpose machines.

Such are the tactics of National Cash Register and—to some extent—of Burroughs Corp. Each company has developed check-sorting machines that facilitate banking procedures. And each reports growing sales for the equipment they have so far marketed. Some experts believe that the country's banks will spend



IN ANGINA PECTORIS AND CORONARY INSUFFICIENCY

... treatment should also control the patient's ever-present anxiety about his condition.



AFTER MYOCARDIAL INFARCTION

... the disabling fear and anxiety that invariably accompany the condition must also be reduced.

Protects your coronary patient better than vasodilation alone

Unless the coronary patient's ever-present anxiety about his condition can be controlled, it can easily induce an anginal attack or, in cases of myocardial infarction, considerably delay recovery.

This is why Miltrate protects the heart better than vasodilation alone in coronary artery disease. Miltrate contains not only PETN (pentaerythritol tetranitrate), acknowledged as basic therapy for long-acting vasodilation. What is more important - Miltrate provides Miltown, the tranquilizer of proven effectiveness in relieving anxieties, fear and day-to-day tension.

Thus, your patient's cardiac reserve is protected against his fear and concern about his condition . . . and his operative arteries are dilated to enhance myocardial blood supply.



WALLACE LABORATORIES / New Brunswick, N. J.

Supplied: Bottles of 50 tablets. Each tablet contains 200 mg. Miltown and 10 mg. pentaerythritol tetranitrate.

Dosago: 1 or 2 tablets q.i.d. before meals and at bedtime, according to individual requirements.

MEDICAL ECONOMICS · MAY 23, 1960 159

INVEST IN OFFICE-EQUIPMENT STOCKS?

close to \$500,000,000 in the next few years just for automated accounting systems.

What's Ahead?

All this should help maintain, and possibly speed up, the industry's average annual growth rate of 10 per cent. Even so, research and development costs will continue to plague most companies for some time to come, keeping profits uneven. And even if IBM's percentage of the market dwindles somewhat, there's no reason to believe that its spectacular growth will be halted.

Is this one giant company therefore the only logical choice for an investor who wants to cash in on the automation boom?

Certainly, IBM remains a favorite of many securities analysts, despite its high current market price. But both National Cash Register and Burroughs are good-quality issues. The doctor who buys either of them must simply expect wider fluctuations in the price of his stock. And the shares of other old-line companies that are trying to make the transition into the age of automa-

tion are proportionately more speculative.

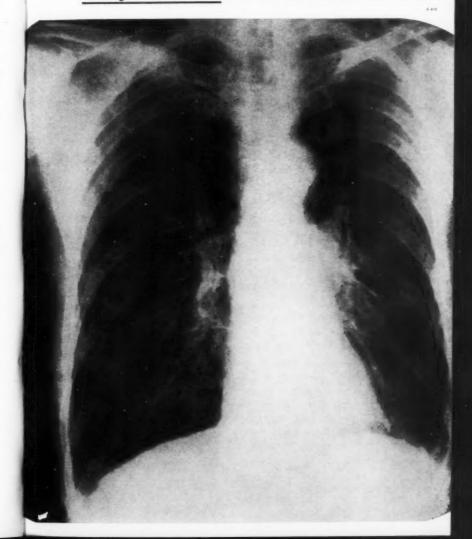
The would-be investor in this field should also note that there are a number of peripheral firms with fine records and prospects. Businessmen are faced constantly with an ever-increasing need for complete records and a larger correspondence load. So the small concerns that produce business forms are almost certain to grow steadily. Among the most prominent: Moore Corp. and Standard Register.

New Equipment

At the same time, businessmen are on the lookout for any kind of new equipment that will keep up with the paper work and keep down the payroll. Another fast-growing segment of the office-equipment industry satisfies their needs. It consists of companies that make office addressing, copying, printing, and postal equipment. Addressograph-Multigraph and Pitney-Bowes are two outstanding examples of comparatively small corporations that have good records of steady and profitable growth. An up-

DERONIL Schering

steroid potential confirmed and fully realized in bronchial asthma



Unique benefit of APRESOLINE®

helps reverse advancing hypertension

Apresoline contributes an exclusive action to the antihypertensive program: It is the only therapeutically acceptable agent to increase renal blood flow and relax cerebral vascular tone while it lowers blood pressure. With improved kidney function, advancing hypertension can often be halted—or even reversed.

Apresoline is indicated for moderate to severe and malignant hypertension, renal hypertension, acute glomerulone-phritis, and toxemia of pregnancy.

When less potent drugs are not fully effective, when renal function must be improved, Apresoline is a logical prescription. Except in rare instances side effects are not a serious problem when the recommended maximal daily dosage (400 mg.) is not exceeded.

SUPPLIED: Tablets, 10 mg., 25 mg., 50 mg.

APRESOLINE® hydrochloride (hydralazine hydrochloride ciBA)



OFFICE EQUIPMENT

and-coming specialist in the field is Haloid Xerox, which manufactures the first automatic office copying machine to use ordinary paper. (Because Haloid Xerox depends mostly on one product, it's somewhat more speculative.)

Thus, the doctor-investor has a wide variety of stocks to select from if he wants to put money into office-equipment shares. But he'd better not pick the big computer-minded companies-with the possible exception of IBMif he's looking for stability. The costs involved in the development of huge, complex machines and automated business systems will keep profit margins low for a long time. Meanwhile, competition shows no sign of dwindling. As a result, most individual companies will probably experience not only growth but a good many growing pains in the years ahead.

If you decide to invest in the industry, check with your broker or financial adviser first. He'll be able to tell you more about the best buys in the field. He may even be able to suggest a relatively obscure company whose unique qualities exactly suit your investment needs.



When blood pressure must come down

When you see symptoms of hypertension such as dizziness, headache, and fainting your patient is a candidate for Serpasil-Apresoline. Even when single-drug therapy fails, Serpasil-Apresoline frequently can bring blood pressure down to near-normal levels, reduce rapid heart rate, allay anxiety.

SUPPLIED: Tablets #2 (standard-strength, scored), each containing 0.2 mg. Serpasil and 50 mg. Apresoline hydrochloride; Tablets #1 (half-strength, scored), each containing 0.1 mg. Serpasil and 25 mg. Apresoline hydrochloride.

SERPASIL-APRESOLINE





for your
patients
who meet
their
frustrations
with food

PHANTOS and PHANTOS-10

fit the needs of these "should, but can't" reducers

PHANTOS (full strength) and PHANTOS-10 (two-thirds strength for those who can be managed on lower dosage) effectively counteract the underlying causes of overeating which make the patient "who just can't stay on a diet" so difficult and discouraging to treat.

PHANTOS and PHANTOS-10 provide: mood elevation to help allay the stress and depression which weaken will power, plus day-long appetite suppression a helpful metabolic boost convenient once-a-day dosage alleviation of morning constipation and evening excitation.

Each PHANTOS or PHANTOS-10 capsule provides these three separately timed releases throughout the day:

timed releases	· till	oughout the day. PHANTOS -10 (full (two-thirds strength) strength)
IMMEDIATE RELEASE		Amphetamine sulfate .5 mg. .3.33 mg. Thyroid ½ gr. ½ gr. Atropine sulfate 1/360 gr. 1/540 gr. Aloin ½ gr. ½ gr.
INTERMEDIATE RELEASE	X	Amphetamine sulfate 5 mg 3.33 mg Thyroid ½ gr ½ gr Atropine sulfate 1/360 gr 1/540 gr
FINAL		Amphetamine sulfate 5 mg 3.33 mg. Thyroid 4 gr. 4/ gr. 1/4 gr. Phenobarbital* 4/ gr. 1/6 gr. (Warning: May Be Habit-Forming)

DOSAGE: One PHANTOS or PHANTOS-10 Capsule daily, taken on arising.

COOPER, TINSLEY LABORATORIES, INC., HARRISON, N. J.



Let's Stop SOUNDING Like Doctors!

BY PAUL HEIN JR., M.D.

Suppose your morning mail brought you a letter beginning: "Yours of the 17th inst. duly received by us, and in reply would beg to state..." Wouldn't you be dismayed at the prospect of plowing through more such verbiage?

Yet we doctors write—and sometimes even talk—in prose that's just as awkward. We're so used to our private language that we hardly notice it. But we should notice it. Our public does. You're a rare man, I suspect, if you've never been told by a patient that he can't understand

you when you talk "like a doctor."

Why do we go right on talking "like doctors"? Is our peculiar way of expressing ourselves the only truly scientific way? I doubt it. I think it's merely obscure. It's so obscure that we even have trouble communicating with one another—in writing, at least.

When we're caught off guard, we do know how to say things simply. Listen to some doctors talking in the snack shop. One of them might well say: "I saw an interesting case yesterday. A

Continued on page 168

ns



for patients who act like restless tigers at night

gentle relaxant-sedative

WITH TIMED-RELEASE ACTION FOR A FULL NIGHT'S SLEEP

nebralin

TIMED-RELEASE TABLET

Might as well try to put a tiger to bed (and keep him there) as to get most patients to sleep naturally all night. For disturbed, interrupted sleep is the most common sleep problem in routine practice. Nebralin—a timed-release tablet—encourages muscular relaxation and sustained, relaxed sleep. The combination of mephenesin and Dorsital* in Nebralin not only relaxes skeletal muscles, overcomes "fatigue-tension" and conditions the body for sleep, but also induces sound, relaxed sleep by gentle CNS sedation. Mephenesin is capable of producing sleep, and when combined with a barbiturate enhances barbiturate action. And of the integrated action of the two components permits smaller dosage of each. Thus, Nebralin—a gentle relaxant-sedative—avoids morning hangover, and carries your patients through the middle of the night, especially those patients who complain about waking up at 2 A.M.

Schlesinger, E. B.: Tr. New York Acad. Sc. 2:6 (Nov.) 1948. 2. Richards,
 R. K., and Taylor, J. D.: Anesthesiology 17:314, 1956. 3. Shideman, F. E.:
 Postgrad. Med. 24:207, 1958. 4. Berger, F.: Pharmacol. Rev. 1:243, 1949.



Each Nebralin timed-release tablet contains: Dorsital*, 90 mg.;
Mephenesin, 425 mg. Dosage: One or two tablets ½ hour before retiring. Supplied: Bottles of 50 Nebralin timed-release Tablets.

Dorsey brand of pentobarbital

SMITH-DORSEY - a division of The Wander Company - Lincoln, Nebraska

LET'S STOP SOUNDING LIKE DOCTORS!

50-year-old woman said she'd had the sniffles every week-end for the last fifteen years."

That's good, clear English. But would he write it? Never! If he were to write up the case, he'd "dignify" his presentation as follows:

'All Dressed Up . . .'

"The patient, a 50-year-old female, was first seen by this examiner on May 6 of this year. At that time she presented with the chief complaint of coryza of fifteen years' duration. Upon questioning, it was revealed that the patient's attacks were cyclical in nature, occurring only on the week-end."

In such presentations, the patient never has anything; he presents with something. And whatever the patient presents with must be translated into appropriately high-flown language. Who would have a rash when he could have an exanthematous lesion? Why stagger when you can be ataxic? Or be caught short of breath when you can present with respiratory distress?

It isn't just that we abandon

plain English words for fancy Latin ones. We also like to avoid a simple *statement*—possibly because we feel safer when we're vague. Here's an example:

I open a journal at random to a case presentation. The author writes: "Physical examination on admission revealed a thin, poorly developed 14-year-old girl who weighed 60.5 lb. (27.5 kg.) and was in no apparent distress."

Translation, Please?

I suppose we can assume that the doctor is trying to say: "Thīs 14-year-old girl weighed only sixty pounds on admission." But what can we assume from his remark about no apparent distress? Does he mean that the patient said she felt all right? Or was she in some *inapparent* distress? What is distress, anyway?

Let's read on: "The second pulmonic sound was markedly accentuated." He means it was loud. "A short murmur was heard in the" He means he heard a murmur. "The remainder of the physical examination

Continued on page 172

COUMADIN BIBLIOGRAPHY

COUMADIN BIBLIOGRAPHY

It Freshman, 8. The use of auditosegueists in the treatment of contenty and temperature and auditosegueists in the treatment of contenty and temperature and the secondary an

Other published literature referring to Endo's COUMADIN

Coumadin is the original and only warfarin sodium responsible for establishing this drug as "the best anticoagulant available today" (over 50 published papers since 1953)

IN MYOCARDIAL INFARCTION AND OTHER THROMBOEMBOLIC DISORDERS

SUPPLIED: Oral - scored tablets, 2 mg., 5 mg., 71/2 mg., 10 mg., 25 mg. Parenteral - single injection units, consisting of one vial, 75 mg., and one 3-cc. ampul Water for Injection.

COUMADIN (warfarin) Sodium is manufactured under license from the Wisconsin Alumni Research Foundation... clinically established by Endo.

ENDO LABORATORIES

Over 60,000,000 doses of Coumadin administered to date

in edema or

more doctors are prescribing—
 more patients are receiving the benefits of—
 more clinical evidence exists for—



"Chlorothiazide was given to 16 patients for a total of 295 patient-treatment days." "Chlorothiazide is a safe, oral diuretic with a clinical effect equal to or greater than a parenteral mercurial." Harvey, S. D. and DeGraff, A. C.: N. Y. State J. Med., 59:1769, (May 1) 1959.

DOSAGE: Edema—One or two 500 mg. tablets DIURIL once or twice a day. Hypertension—One 250 mg. tablet DIURIL twice a day to one 500 mg. tablet DIURIL three times a day.



"... our program has been one of polypharmacy in which we attempt to deplete body sodium with chlorothiazide. This drug is continued indefinitely as background medication for all antihypertensive drugs." Moyer, J.H.: Am. J. Cardiology, 3:199, (Feb.) 1959.



"Chlorothiazide is an excellent agent for relief of swelling and breast soreness associated with the premenstrual tension syndrome, since all patients [50] with these complaints were completely relieved." Keyes, J. W. and Berlacher, F. J.: J.A.M.A., 189:109, (Jan. 10) 1959.

SUPPLIED: 250 mg. and 500 mg. scored tablets DIURIL (chlorothiazide) in bottles of 100 and 1,000. DIURIL is a trademark of Merck & Co., INC. Additional information is available to the physician on request.

ertensio

than for all other diuretic-antihypertensives combined!



"One hundred patients were treated with oral chlorothiazide." "In the presence of clinically detectable edema, the agent was universally effective." "Chlorothiazide is at present the most effective oral diuretic in pregnancy." Landesman, R., Ollstein, R. N. and Quinten, E. J.: N. Y. State J. Med., 59:66, (Jan. 1) 1959.



in cirrhosis with ascites

"All three of the patients with Laennec's cirrhosis, ascites and edema had a favorable response, with a mean weight loss of 8 lbs., during the fiveday treatment period with a slight decrease in edema." Castle, C. N., Conrad, J. K.

and Hecht, H. H.: Arch. Int.



"In a study of 10 patients with the nephrotic syndrome associated with various types of renal disease, orally administered chlorothiazide was a successful, and sometimes dramatic, diuretic agent." Burch, G. E. and White, M. A., Jr.: Arch. Int. Med., 103:369, Med., 103:415, (March) 1959. (March) 1959.



MERCK SHARP & DOHME Division of Merck & Co., INC., Philadelphia-1, Pa.

LET'S STOP SOUNDING LIKE DOCTORS!

showed essentially normal results." Essentially, mind you, not accidentally. The "remainder" of the physical exam means the rest of it. And the word "physical" reassures you, I suppose, that the doctor wasn't examining the child's psyche.

Later, "The patient was seen in consultation by Dr. X." Note the constant use of the passive. This is a must in medical writing. No one ever sees or examines; patients are seen and examined by...

A Child Prodigy

Now the presentation soars to a high level: "During the first day of therapy the patient complained of circumoral paresthesia and generalized pruritus." I doubt that any such complaint was ever made. No 14-year-old girl—even a sick one—would talk like that. What she probably said was that her lips tingled and that she itched all over.

My complaint is that we gain nothing by substituting medical jargon for clear English—that, indeed, we lose precision. Are complex words and syntax necessary in order to communicate medical knowledge? I'm sure they aren't. The truth is that doctors usually manage to understand each other *in spite of* our time-honored medical style, not because of it.

Consider the very first sentence in another article: "Immediate reactions to a foreign material in a hypersensitive person may be of such severity that death results." If the author wants to say that anaphylactic shock can be fatal, why doesn't he?

A few sentences later; he states: "It is always difficult to derive certainty from some of the reports..." It is indeed frustrating to try to "derive certainty" from reports written like that.

And they generally *are* written like that. Take, for instance, this sentence I found in a medical textbook:

"This action brings a member of the B complex—nicotinic acid—into an auxiliary position in the rhodopsin system." What does it mean? What is an auxiliary position? Where exactly



... For minor cuts and burns, sunburn, hemorrhoids, removing sutures, performing routine office surgery, making instrument examinations. And, to best suit every situation, there's a choice of Ointment, Cream, Lotion, Suppositories.

Complete information available on request.

MEDICAL ECONOMICS · MAY 23, 1960 173

r

e

f d

C

LET'S STOP SOUNDING LIKE DOCTORS!

does nicotinic acid fit into the "system"?

Another way that our medical style can substitute jargon for exact thinking is in its constant use of grandiose terms. For example, there's the way we use the term "potential."

Against All Logic

As a beginning medical student, fresh from a philosophymajor premedical course, I answered an unhesitating "False" to this statement in an examination: "The space between lung and chest wall is a potential space." Of course, I was wrong. For some reason, doctors like to speak of any tiny space, or any filled space, as a potential space —even though the concept of a potential space is nonsense.

And so it goes. We speak of the "intraocular" pressure, as though there were some other ocular pressure. We use the expression "acute emergency" without blushing, although what a chronic emergency might be is beyond my imagination. "Lesion" is a word we love, though it covers such a multitude of things that it's practically undefinable.

Obscurity and wordiness have become the hallmark of "medical literature." Doctors speak of "the literature" as though it were the work of one man, not the individual efforts of thousands. And with good reason! Look at any textbook. Pick up any journal. Read a few pages. They all sound alike, though each chapter or article may have been written by a different person.

If we could get away from such standardized verbosity, we would make things easier for everybody. The examples above are a reminder that plain English isn't merely clear; it's also terse. If we'd say things simply, the sheer bulk of medical writing could be cut significantly.

We're the Losers

True enough, physicians are not alone in misusing our language. Politicians misuse it, for example. But they want to be imprecise. The doctor, on the other hand, can do his job well only if he spreads truth, not confusion, through his words. END

Butazolidin

brand of phenylbutazone

f

r

Ten years of experience in countless cases—more than 1700 published reports—have now established the leadership of Butazolidin among the potent non-hormonal antiarthritic agents.

Repeatedly it has been demonstrated that Butazolidin: Within 24 to 72 hours produces striking relief of pain. Within 5 to 10 days affords a marked improvement in mobility and a significant subsidence of inflammation with reduction of swelling and absorption of effusion.

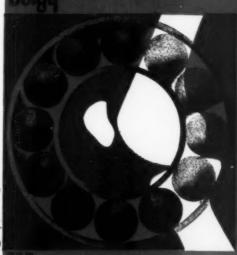
Even when administered over months or years Butazolidin does not provoke tolerance nor produce signs of hormonal imbalance.

Butazolidin® (brand of phenylbutazone): Red-coated tablets of 100 mg. Butazolidin® Alka: Capsules containing Butazolidin® 100 mg.; dried aluminum hydroxide gel 100 mg.; magnesium trisilicate 150 mg.; homatropine methylbromide 1.25 mg.

Geigy, Ardsley, New York

in arthritis and allied disorders

proved by a decade of experience



ANNOU

first continuous, precise recorder of fetal heart rate gives early warning of fetal distress

For further details, call or write

Epsco XX MEDICAL

NCING

HON* FETAL MONITOR

Obstetricians now have a new and improved diagnostic tool for clinical and research purposes.

First displayed at the 1960 Cincinnati meeting of the American College of Obstetrics and Gynecology, the Hon Fetal Monitor is capable of continuously recording the fetal heart rate throughout labor and delivery under typical delivery room conditions. It provides separate, fetal and maternal EKGs, instantaneous meter display in recording fetal heart rate, and measurement of uterine pressure. Earliest possible warning of fetal heart rate deviations is given which provides an objective record of value in the immediate handling of the patient.

In situations where the fetal heart beat is difficult to discern and where fetal life cannot be determined by present clinical methods (such as bleeding problems of middle pregnancy or where the patient is obese or polyhydramnious) the Monitor is capable of detecting fetal life in approximately ninety per cent of such cases. It is also valuable for diagnosis of multiple pregnancy.

The fetal EKGs are recorded continuously by a new rectilinear ink writing system on inexpensive, folded paper, or electric trace, if desired. An oscilloscope also provides visual monitoring.

*The Fetal Monitor was developed by Dr. Edward H. Hon, Assistant Professor of Obstetrics and Gynecology, Yale University School of Medicine, and electronic scientists of Epsco Medical. It consists of a self-contained wheeled unit 20" x 24" x 64" high, with recorders in a pull-out drawer. All controls and indicators are mounted on a central panel, with recorders horizontal at table height. Its operation requires no special electronic training. Orders are now being accepted and deliveries scheduled as received. Price \$9,950.

REFERENCES: (1) Hon, E. H.: The electronic evaluation of the fetal heart rate. Am. J. Obs. & Gyn., 75:6, pp. 1215-1230, June 1958. (Preliminary Report). (2) Hon, E. H.: Observations on "pathologic" fetal bradycardia. Am. J. Obs. & Gyn., 77:5, p. 1084, May 1959. (3) Chung, F. C. and Hon, E. H.: Electronic evaluation of fetal heart rate. I. With pressure on the fetal skull. Obs. & Gyn., 13:633, 1958. (4) Hon. E. H.: The fetal heart rate patterns preceding death in utero. Amer. J. Obs. & Gyn., 78:47, 1959. (5) Hon. E. H., Reid, B. L. and Hehre, F.: The electronic evaluation of fetal heart rate. II. With maternal hypotension. Amer. J. Obs. & Gyn., 79:209, 1960.

275 MASSACHUSETTS AVENUE, CAMBRIDGE 39, MASS. . University 4-4950



when emotional turbulence threatens medical or surgical care

Fear, agitation, and resistance often hinder medical diagnosis and treatment.

Sparine alleviates agitation, overcomes resistance, placates fears.

In addition to calming the patient, SPARINE controls other interfering symptoms: nausea, vomiting, and hiccups.

Wyeth Laboratories, Philadelphia 1, Pa.

Sparine[®]

HYDROCHLORIDE

Promazine Hydrochloride, Wyeth
INJECTION TABLETS SYRUP

A Century of Service to Medicine Groups are the thing these days—not only group
medicine but also group travel. Ever thought of
chartering a special plane for a jaunt with your
colleagues and their families? These
doctors have found it's the

Lowest-Cost Way to Get to Europe

By James P. O'Neill

L ast August, an obstetrician from New York's Westchester County arrived at Idlewild airport after treating himself and his wife to a three-week vacation in Europe. The trip had cost them \$4,500. A few minutes later, an internist from Brooklyn and his wife landed at the same airport. They'd also been in Europe for three weeks. There were other similarities: Both couples had stayed at Class A hotels, and both had visited the same places.

But there was one big difference: The Brooklyn couple's trip had cost them about \$1,500—one-third what the other couple had spent.

The Brooklyn internist is neither a conniver nor a magician. He's one of those wise travelers now taking advantage of the newest wrinkle in transportation—plane charter. Last year, he and 149 other vacationists—all members of the Kings County medical society or their families—chartered two Swissair DC-7Cs for a flat fee of \$46,000.

While aloft in the chartered planes, the passengers were

ind

ing

LOW-COST WAY TO EUROPE

treated to champagne, fine food, special travel bags, and other luxuries ordinarily provided only on the most expensive flights. Included also was a convenience that few individuals traveling to Europe could obtain at any price:

The party had arranged a tour that began in Geneva and terminated in Paris. So Swissair arranged to drop them off in Geneva and pick them up twenty-two days later in Paris for the trip home. (Round-trip plane reservations are usually good only between two terminal points.)

Total plane cost: \$307 per person, round trip. (The Westchester obstetrician, on the other hand, paid \$857 for each of his round-trip tickets.) Such rewarding economics of plane chartering have increased the business in the past six years to a point where it now accounts for nearly 10 per cent of all trans-Atlantic air travel. And it's possible that charter prices will go even lower in the next couple of years. Reason: More piston-engine planes will be made available as jets begin

Continued on page 184

BACK HOME AGAIN after a three-week European vacation in 1959, happy Brooklyn, N.Y., doctors and their families disembark from the airliner they chartered. Many are taking a similar trip this year, too.



TO FIT YOUR PATIENT...

NEW...

ORTHO® Arcing Spring Diaphragm



Person a perfect are easy to insert...Ideal for the normal and difficult-to-fit patient.

ORTHO° Diaphragm (coil Spring)



Heres in all planes - adapts readily to irregular contours of the vagina...

ORTHO®-WHITE Diaphragm (Flat Spring)



Nexes in one plane - inserts easily, needs no introducer... light as a feather and white as snow.

A COMPLETE CHOICE



erter

nd, ndcove ast ow ent el.

ter he

n: vill gin 84

py ier



Some months yet before the newcomer's due. Even now, though, mother-to-be has the "things to do" list well in hand. When it comes to her nutritional schedule, however, Doctor, she'll likely need your helpand a comprehensive prenatal supplement like Pramilets. Pramilets o assure your pregnant patient the extra vitamin-mineral support she requires-phosphorus-free calcium (a good supplemental dosage), iron, in the form of ferrous fumarate, plus the other necessary nutrients. Dosage? Convenient. (Just a single, compact Filmtab a day, in most cases.) The graceful 100-Filmtab bottle goes well on the patient's dresser or table, too.

> Comprehensive vitamin-mineral support with just one Filmtab daily.









XUM



new

BLONDER-TONGUE FM RADIO

relaxes your patients with pleasant background music

Are your patients . . . patient? You can help them relax and enjoy their waiting room time with the new Blonder-Tongue FM Radio. This superbly engineered radio provides your patients with a wide variety of wonderful music. X-ray and other electrical equipment never interfere with its performance . . . and the Blonder-Tongue FM Radio will not fade, drift—it's completely static-free.

There are no complicated wiring problems with the Blonder-Tongue FM Radio. Just plug it into any convenient wall socket, and it's ready to fill your waiting room—or any room in your office with magnificent background music. Attractively styled, the Blonder-Tongue FM Radio is an economical and a complete background music system.

Model R-20 FM radio only \$39.95 Model R-98 FM/AM only \$47.50

at your dealer today.



BLONDER-TONGUE LABORATORIES, INC. 9 Alling St., Newark, N. J.

184 MEDICAL ECONOMICS · MAY 23, 1960

LOW-COST WAY TO EUROPE

to displace them from scheduled flights.

Not every organization can charter a plane for an overseas trip. The Civil Aeronautics Board has laid down certain rules for eligibility. In general, the chartering group should be a dues-collecting organization with regular meetings and by-laws. In addition, a participating member should have been paying dues for at least six months; and he can take only persons from his household with him.

Any local chapter of the

Amusing . . .
Amazing . . .
Embarrassing . . .

No doubt one of these adjectives describes some incident that has occurred in the course of your practice.

Why not share the story with your colleagues?

If it's accepted for publication, you'll receive \$25-\$40 for it. Contributions must be unpublished. They cannot be either acknowledged or returned. Those not accepted within ninety days may be considered rejected.

Address: Anecdote Editor, MEDICAL ECONOMICS, Oradell, N. J.



NEEDED: THE APPETITE SUPPRESSANT STRONG ENOUGH AND SAFE ENOUGH TO DO THE JOB

Ambar controls many cases of overeating/ obesity refractory to usual therapy. To strengthen the will for successful dieting, the methamphetamine-phenobarbital in Ambar is designed to improve mood without harmful CNS overstimulation. Available in different forms to enable individualization of dosage: AMBAR #1 EXTENTABS, 10-12 hour extended action tablets, methamphetamine HCl 10.0 mg., phenobarbital 64.8 mg. AMBAR #2 EXTENTABS, methamphetamine HCl 15.0 mg., phenobarbital 64.8 mg.

Also conventional AMBAR TAB-LETS, methamphetamine 3.33 mg., phenobarbital 21.6 mg.

A. H. ROBINS CO., INC., RICHMOND, VA.

Ambar#1 Extentabs / Ambar #2 Extentabs

ed

an as es he a th In

es he nis

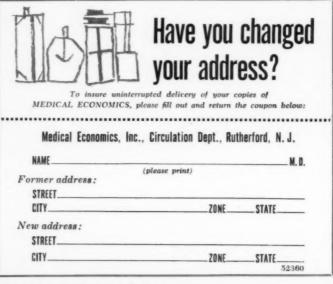
he

LOW-COST WAY TO EUROPE

A.M.A. fits into the eligible category. But nation-wide organizations—the A.M.A. itself, for instance—do not qualify. The C.A.B. has ruled that they're too broad in character. Doctors who can't interest their county societies in chartering a plane needn't feel stymied, though. They probably belong to one or more other eligible groups, such as Chambers of Commerce and civic and fraternal clubs.

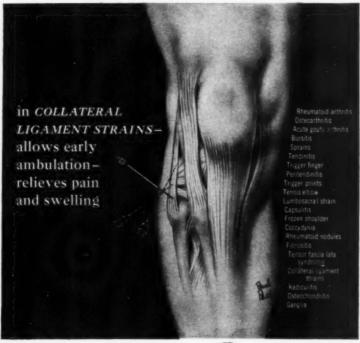
Is the chartering process complicated? No, it can be quite painless. In the case of the Kings County society, for instance, 90 per cent of the details for the 1959 trip were handled by the society's assistant medical director and a travel agent. "They did everything but take the shots for us," says one satisfied Brooklyn man. Here's the way the trip was planned:

Last year, at the January meeting of the society, a committee was appointed to explore the economics of chartering a plane for a three-week tour of Europe in late July or early August. The assistant medical director then got

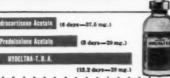


HYDELTRA-T.B.A.

for relief that lasts - longer



Guration of relief E exceeds that provided by any other steroid exter



Ossage: the usual intra-articular, intra-bursal or soft tissue dose ranges from 20 to 30 mg, depending on location and extent of pathology.

Supplied: Suspension 'MYDELTRA'-T.B.A.—20 mg./cc. of prednisolone tertiary-butylacetate, in 5-cc. vials.



MERCK SHARP & DONNE DIVISION OF MERCK & CO., INC. PHILADELPHIA 1, PA.

MEDICAL ECONOMICS · MAY 23, 1960 187

ne ne

id or n

t-ee

or

in

S-

ot

TO PREVENT DANGEROUS SELF-MEDICATION BY "COLON-CONSCIOUS" PATIENTS

Experience shows that bowel-conscious patients will try almost anything in their search for relief from constipation. Why not protect them from potentially harmful agents? Satisfy their expectations safely by prescribing or recommending Zilatone Tablets—a rational formulation of bile salts, mild laxatives and digestants—gentle enough even for the gravid or cardiac patient.

A random survey* of 722 Zilatone users indicated that 99 percent would take Zilatone again whenever they feel the need of a laxative. Yet over 70 percent of the respondents previously had used a total of at least 40 other products.

When a laxative is needed, Zilatone will satisfy the demanding criteria of thorough effectiveness and safety.

zilatone

Supplied: In boxes of 20, 40, and 80 tablets in all drug stores.

For professional samples, write: DREW PHARMACAL CO., INC. 1450 Broadway, New York 18 *Details on request

188 MEDICAL ECONOMICS · MAY 23, 1960

LOW-COST WAY TO EUROPE

in touch with a New York City travel agency that's run by the two sons of Dr. Allen Hull, who's a member of the Kings County society.

The Hull agency asked Dr. Charles F. McCarty, the society's director, to fill out the required charter applications to the C.A.B. and the International Air Transport Association. Dr. McCarty got written approval within two weeks. Then the travel agency began literally to shop around for a plane, since costs differ with each airline and with each season. For example, in the summer, when airlines need every plane they can muster, the approximate cost per mile for a pistonengine plane is \$3.25. From January to March, the same piece of equipment can be chartered for as little as \$2.10 a mile. (Jets aren't yet available for chartered flights.)

By the time the February meeting rolled around, the agency had lined up a Swissair DC-7C. And, working with the committee of doctors, it had roughed out an itinerary for a twenty-two-day European tour. The round-trip

Continued on page 192



ANEMIA? how you can have on-the-spot, laboratory-accurate hemoglobin determinations to confirm your clinical diagnosis...and check the effectiveness of progressive treatments.



AO Hb METER! You or your nurse can make hemoglobin determinations in less time than it takes to make an oral temperature reading. Pocket size...use it at hospital, office or bedside. Used by doctors over four million times last year. Ask your Surgical Supply dealer for a demonstration or write:

American	o Optical
Tomp Comp	oany
SPENCER	-
INSTRUMENT DIVISION, I	SUFFALO IS, NEW YORK

Please send AO Hb Meter.	me complete	information	on the
Name			
Address			
City	Zon	eState	

IN CANADA write-American Optical Company Canada Ltd., Box 40, Terminal A, Toronto, Ontario

MEDICAL ECONOMICS . MAY 23, 1960 189

ie 's

r.

3. s-

y

0

y

or h ir, e i-

of r s d

d

l, of n



The new "spoon" penicillin

Blood levels after oral administration: twice as high as oral potassium penicillin V.¹

4.0 4.0 (uce '.ur)

Search (uce '.ur)

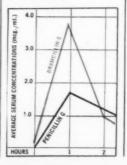
Search (uce '.ur)

1.0 (search (uce '.ur)

All (uce '.ur)

Hours 1 2

... and twice as high as intramuscular penicillin G potassium.¹



...absorbed speedily throughout the gastrointestinal tract—stomach to colon.²



190 MEDICAL ECONOMICS - MAY 23, 1960



that surpasses* the "needle"

Effective against "resistant" staphylococci: Some strains of staphylococci resistant to penicillins G, O and V exhibit sensitivity to potassium phenethicillin (DRAMCILLIN-S). This synthetic penicillin appears more resistant than natural penicillins to inactivation by staphylococcal penicillinase. Allergenicity possibly reduced: Although allergic reactions to the new, synthetic penicillin have not been reported, it is not as yet possible to draw definite conclusions regarding the incidence of allergenicity to DRAMCILLIN-S, or to its cross-allergenicity with natural penicillins. While oral therapy presents less danger of severe allergic reactions than does parenteral penicillin therapy, the usual precautions for oral penicillin therapy should always be observed. Special care should be exercised in patients with histories of asthma, hay fever, urticaria, or previous reaction to penicillin.

Indications: DRAMCILLIN-S is indicated in the treatment of infections caused

by penicillin-sensitive organisms. Like all oral penicillins, it is not recommended at present in deep-seated or chronic infections, subacute bacterial endocarditis, meningitis or syphilis.

Dosage: 1 or 2 teaspoonfuls (125 mg./ tsp.), three or four times daily, depending on the severity of the infection. To assure optimum blood levels, it is advised that this medication be taken in the fasting state. Beta hemolytic streptococcal infections should be treated for at least ten days.

Availability: Bottles of 30 and 60 cc. Each teaspoonful (5cc.) supplies 125 mg. DRAMCILLIN-S, equivalent to 200,000 units of penicillin.

References: 1. Wright, W.: Cited by Morigi et al. 3. a. Prodell, M., Tisch, D. E.; Hoekstra, J. B., and Reiffenstein, J. C.: Antibiotics Annual, 1959-1960, p. 119. 3. Morigi, E. M. E.; Wheeley, W. B., and Albright, H.: Antibiotics Annual 1959-1960, p. 127.

DRAMCILLIN-S

MEDICAL ECONOMICS - MAY 23, 1960

1-

LOW-COST WAY TO EUROPE

plane fare broke down to \$307 per seat on a plane with seventy-five seats. The price of the European tour itself was estimated at \$443 per person. Exact cost would depend on the cities and sites the group finally selected.

The Brooklyn doctors liked the idea so much that the committee felt justified in going ahead with its plans. It now mapped out a specific itinerary that brought the total package price per person to \$750. This would include all meals (except for a few lunches in cities where the travelers preferred to be on their own), sightseeing fees, motor bus charges, and railroad fares. Only one big question remained: Would enough doctors buy the idea to fill a plane?

Early in March, a letter went out to every member of the Kings County society. The letter explained the full program; and it was accompanied by an application blank. The society's president, Dr. David Kershner, who signed the letter, carefully pointed out that no contractual agreements had been made with either



CICLINIC HOURS 2 PM TUES

"... which antacid? Rorer's Maalox. Excellent results, no constipation plus a pleasant taste that patients like."

MAALOX® an efficient antacid suspension of magnesium-aluminum hydroxide gel offered in bottles of 12 fluidounces.

TABLET MAALOX: 0.4 Gram (equivalent to one teaspoonful), Bottles of 100.

Tablet Maalox No. 2: 0.8 Gram, double strength (equivalent to two teaspoonfuls), Bottles of 50 and 250.

Samples on request.

WILLIAM H. RORER, INC., Philadelphia 44, Pennsylvania

MEDICAL ECONOMICS · MAY 23, 1960 193

mo-

oad

re-

tors

ent ings exd it icaesiwho intreeher

delicious tains 25

LOW-COST WAY TO EUROPE

the travel agency or Swissair; therefore, neither of these parties was bound to deliver anything to the society. But the speed with which members returned their applications and checks, he added, would help to guarantee the package. Applications had to be returned by April 15.

In order to bind the agency and Swissair to the commitment before that, the society would have been forced to put up 10 per cent of the total cost of the plane charter. Postponing payment of this \$2,300 was a deliberate gamble on the part of the committee, whose members felt sure the attractive price would be an immediate hit with their colleagues.

The gamble paid off. Within four weeks, the entire plane was filled. Before long, applications for 150 people had been received —and a second plane was chartered. Moreover, a mere sixteen of the eager voyagers applied for the chartered flight only. The rest of the doctors and their families signed up for the entire package.

Continued on page 198



Another fine product from Adolph's Diet Kitchens

FROM PARKE-DAVIS...A NEW ORAL ANTIBIOTIC KAPSEALS* ELLINATION KAPSEALS*

PROVIDES EFFECTIVE ANTIBACTERIAL AND ANTIAMEBIC ACTIONS. USEFUL IN INFECTIOUS DIARRHEAS OF BACILLARY AND NONSPECIFIC ETIOLOGY." PRACTICALLY UNABSORBED, THUS VIRTUALLY NONTOXIC." VALUABLE IN ALL FORMS OF INTESTINAL AMEBIASIS-ACUTE, SUBACUTE, AND CHRONIC. EFFECTIVE IN PREOPERATIVE SUPPRESSION OF INTESTINAL FLORA, AND IN ADJUNCTIVE MANAGEMENT OF HEPATIC COMA."

Supplied: Humatin is supplied as the sulfate in Kapseals,® each containing 250 mg. of base; bottles of 16. Literature supplying details of dosage and administration available on request. References: (1) Courtney, K. O., & Thompson, B. E.: Paromomycin As a Therapeutic Substance for Intestinal Amebiasis and Bacterial Enteritis, Antibiotics Annual 1959-1960, New York, Medical Encyclopedia Inc., in press. (2) Godenne, G. D.: Paromomycin in Diarrheas of Infants and Children, Antibiotics Annual 1959-1960, New York, Medical Encyclopedia Inc., in press. (3) McMath, W. F. T., & Hussain, K. K.: Pub. Health 73:328, 1959. (4) Personal Communications to the Department of Clinical Investigation, Parke, Davis & Company, 1959. (5) Shafel, A. Z.: Antibiotic Med. & Clin. Therapy 6:275, 1959. (6) Eliss, F. L., & Oliver-Gonzalez, J.: Antibiotic Med. & Clin. Therapy 6:584, 1959. (7) Carter, C. H.: Antibiotic Med. & Clin. Therapy 6:586, 1959. (8) Fast, B. B., et al.: Arch. Int. Med. 101:467, 1958. (9) Mackie, J. E., et al.: New England J. Med. 259:1151, 1958. (10) Stormont, J. M., et al.: New England J. Med. 259:1145, 1958.

PARKE, DAVIS & COMPANY · Detroit 32, Michigan PARKE-DAVIS

he elt be

iin

ed rten for

ies

ge.

ng the

s like

eeded

ornia.

es

2



NEW

just pour powder from one packet

each packet is equivalent to one rounded teaspoonful of Metamucil powder

it's new INSTANT MIX METAMUCIL



INSTANT MIX

add cool water slowly ...it's instantly mixed

all the advantages of smoothage therapy in the relief and correction of constipation

it's new INSTANT MIX METAMUCIL

IT'S EFFERVESCENT



stimulates normal peristalsis

keeps stools soft and easy to pass

induces natural elimination

promotes regularity

avoids harsh laxatives or purgatives

it's new **INSTANT MIX METAMUCIL**



delightful, mild lemon flavor

convenient, premeasureddose packets



G. D. SEARLE & CO.

Chicago 80, Illinois

ion

LOW-COST WAY TO EUROPE

A representative of the Hull agency attended the society's June meeting and presented the doctors with flight bags and passport applications. He described the tour in detail, explained passport requirements, and answered questions. Thus, the doctors and their families had an easier time of it than do most individuals who go abroad on their own.

On the night of July 22, the two planes flew to Geneva on the first leg of the tour. The Brooklynites then saw something of the Alps, France, and Italy before heading for Vienna and finally Paris. Vienna had been included in their itinerary for a very good reason: The American Medical Society—an organization of U.S. doctors and medical students resident in the city—was conducting a series of seminars during the first two weeks of August. So most of the physicians attended the medical sessions during their three-day stay in Vienna. And this gave them a legitimate—if limited—tax deduction. More

Watch Out for Phony Charters

If you decide to book a charter flight to Europe, be sure you're dealing with reputable travel agents and airlines. The Metropolitan New York Better Business Bureau has issued a warning against "solicitations by persons attempting to book trans-Atlantic charter flights through . . . unauthorized and nonexistent airlines."

No one has found any fault with charters from legitimate airlines, the Better Business Bureau explains. But there are self-appointed "promoters" who have no connection with any of the lines. Such men sometimes approach an organization that's planning a charter flight and announce that they represent an airline. Once they sell the charter, they may try to peddle it to someone who owns a plane—or they may even pocket the organization's down payment and disappear.

If you're approached by any suspicious-appearing promoters, the bureau suggests that you report them to the Enforcement Bureau of the Civil Aeronautics Board, Washington 25, D.C.

NEW one-two clear-through relief in mucopurulent rhinitis of U.R.I., sinusitis, and allergy

TRYPP

mucolytic enzyme-decongestant

free, easy breathing is restored almost immediately by

- 1. trypsin's mucolytic action which thins and liquefies thick mucus and facilitates removal of crusts... to permit more normal aeration. This allows TRYPP's...
- 2. superior vasoconstrictor to reach and shrink swollen, congested membranes and initiate proper drainage.

clinically proven in over 500 infants, children and adults^{1,2} with upper respiratory infections and exacerbations of chronic sinusitis. Virtually no irritation or sensitivity,¹

Each 8 cc. of TRYPP NOSE DROPS provides: TRYPSIN 7500 Units (3 mg.) PHENYLEPHRINE HCI . 0.25% (20 mg.) with gelatin and other excipients and stabilizers

supplied: in 8 cc. package of powder, bottle of liquid diluent (gives isotonic solution pH 6.5 when mixed) and dropper.

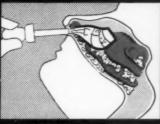
u. s. vitamin a pharmaceutical

Arlington-Funk Laboratories, division 250 East 43rd Street, New York 17, N. Y.

- Maffia, A. J., Levbarg, M., Perillo, L. A. and Greenberg, W.: Archives of Pediatrics 77:28, 1960.
- 2. Taterka, H. and Wasserman, E.: personal communciation.



Mucopurulent discharge and edema obstruct nasal passages in U.R.I., sinusitis and allergy.



TRYPP NOSE DROPS — mucolytic trypsin plus vasoconstricting phenylephring — are inserted.



TRYPP's enzymatic action (trypsin) liquefies thick mucus, loosens crusts, initiates drainage, and permits



TRYPP's decongestant (phenylephrine) to shrink swollen mucous membranes . . and open passages for easy breathing.

fore

ally ded

ood

ical

J.S.

res-

ring So ded heir

rel

ling

ork

by

nes.

рго-

me-

an-

hev

ven

bu-

the



of painful pruritic affections

DERMA MEDICONE

ANESTHETIC . ANALGESIC . NON-TOXIC

DERMATOPHYTOSIS
RINGWORM
INSECT
BITES
PLANT
POISONING
PRURITUS
ANI,
VULVAE ET
SCROTI
SCABIES



A bland, harmless antipruritic—Restores comfort by exerting safe topical anesthesia, affording prompt and prolonged relief from pain and itch. Soothes—heals—inhibits infection—reduces inflammation—promotes epithelial growth



Medicone Company 225 Varick Street New York 14, N. Y.

LOW-COST WAY TO EUROPE

The European tour was such a success that the brochure mailed to members this year includes four separate tours. The trips have also been extended to thirty-two days, since the doctors discovered that the 1959 trip compressed too much into too little time. All will begin on July 11 and terminate on Aug. 11. Members can select any one of the following packages: Scandinavia and England (\$1,070); Mediterranean-Europe (\$1,-070); Near East-Israel (\$1,-350); and Grand Europe (\$1,-020). The quoted prices include the cost of the round-trip chartered flight (New York to London and Paris to New York).

Sound so good that you'd like to arrange a charter flight to Europe, too? Well, you can't—not this year, anyway. There isn't enough time left to plan the details and make all the arrangements. And with this summer's bookings already at a record high, there's no assurance you could find a plane to charter, even if you managed to get all the passengers together in time.

But it isn't too early to begin Continued on page 204



Conception control becomes a matter of special concern six to eight weeks post partum, when the new mother looks to you for advice on the best way to plan the balance of her family. Reliable conception control can be virtually assured with the diaphragm and jelly method, at least 98 per cent effective.

Now-cushioned comfort

... Iwo ways

Your patient experiences special physical comfort when you prescribe either the standard RAMSES® Diaphragm or the new RAMSES BENDEX,® an arc-ing type diaphragm.

The regular RAMSES Diaphragm, suitable for most women, is made of pure gum rubber, with a dome that is unusually light and velvet smooth. The rim. encased in soft rubber, is flexible in all planes permitting complete freedom of motion. For those women who prefer or require an arcing type diaphragm, the new RAMSES BENDEX embodies all of the superior features of the conventional RAMSES Diaphragm, together with the very best hinge mechanism contained in any arcing diaphragm. It thus affords lateral flexibility to supply the proper degree of spring tension without discomfort.

RAMSES, BENDEX, and "TUK-A-WAY" are registered trade-marks of Julius Schmid, Inc.

*Active agent, dode-acethyleneglycol monolaurate \$%, in a base of long-lasting barrier effectiveness.

For added protection—RAMSES "10-Hour" Vaginal Jelly*

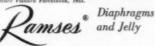
RAMSES Jelly is uniquely suited for use with either type of RAMSES Diaphragm. It is by design not static, but flows freely over the rim and surface of the diaphragm to add lubrication and to form a spermtight seal over the cervix, which is maintained for ten full hours after insertion. It is nonirritating and nontoxic.

You can now prescribe a complete unit for either type of diaphragm. RAMSES "TUK-A-WAY" Kit #701 contains the regular RAMSES Diaphragm with introducer and a 3-ounce tube of RAMSES Jelly; RAMSES "TUK-A-WAY" Kit #703 contains the RAMSES BENDEX Diaphragm and

Jelly tube. Each kit is supplied in an attractive plastic zippered case, beautifully finished inside and out. Both types are now available at key prescription pharmacies.



ce:). Tietze, C.: Proceedings, Third International Con



JULIUS SCHMID, INC. 423 West 55th Street, New York 19, N. Y.

MEDICAL ECONOMICS · MAY 23, 1960 201

E

uch

ure

in-

The i to ors trip too uly 11. e of ndi-0); 51,-\$1,-\$1,ude

art-

don

like

Eu-

-not

sn't

de-

nge-

er's

cord

you

rter.

all

me.

egin 204 in severe
BURSITIS
think of

Cortrophin-



R



for dramatic response and prolonged relief-

with a single, 80-unit, intramuscular injection!

Results in acute bursitis with Cortrophin®-Zinc—the most advanced, longest-acting acth preparation*—

- "Complete relief of acute bursitis was accomplished in 85% of 35 cases treated..."
- "(Dosage was) 1 intramuscular injection of Cortrophin-Zinc ... 2 cc. or 80 U.S.P. units."
- * "Definite clinical improvement occurred within 4 hours . . ."
- "... and complete symptomatic resolution in 24 hours."
 "Complete restoration of painless motion was thus accomplished
- and the patient returned to work within 2 days."

 * "No additional therapy was needed. The simplicity of this treatment is self evident."
 - 'Klosk, E. and Bernstein, A.: J. Newark Beth Israel Hospital 11:58, 1960.

CORTROPHIN-ZINC—preferred over other ACTH preparations, because of these special advantages—

- * Rapid onset-5% is free ACTH for quick absorption.
- * Prolonged action-48- to 72-hour action with 1 cc. (40 units).
- * Safety-slow, steady release avoids over- and under-dosages.
- * Convenience-free-flowing; no pre-heating needed.
- * Purity-minimizes risk of sensitization.
- Painlessness—because of fine, aqueous suspension, small needle.

Supplied: 40 or 20 U.S.P. units/cc., 5-cc. vials; 1-cc. (40 U.S.P. units) ampuls with sterile, disposable syringe.



Organon Inc., West Orange, N. J.

LOW-COST WAY TO EUROPE

thinking about 1961. If you are interested, here are a few tips from Dr. McCarty:

¶ Plan early. The 1960 applications were sent to society members last November.

¶ Let a reputable travel agent do the work. He'll charter the plane, arrange hotel and train reservations, provide sight-seeing tours, and take care of the hundred and one other details-at no cost to you. His commission comes from the airline and Euopean travel agencies. (You can deal directly with the airlines yourself. But the Brooklyn doctors don't recommend it. They suggest dealing with an agency that's approved by the International Air Transport Association and that therefore conforms to the standards of that body.)

¶ Don't assign seats; have the members pick their seat numbers out of a hat. Plane seating is broken down into three sections: first class, economy class, and tourist class. The main difference is that the seats have more space between them as they go up in class. But wherever you sit, you'll enjoy first-class service on any charter flight. By raffling the seats, you simply eliminate the possibility of hard feelings.

¶ Leave the kids at home. The pace and excitement of tour travel tires them easily. And they can become quite a burden.

¶ Plan to have your charter flight begin from New York. You'll be much more likely to get a plane than you would be from most other cities-and you'll find it's cheaper.

ke the short cut

Those of you who've treated neurodermatitis will understand the longing of the old lady who came to me after repeated and unsuccessful treatment by other doctors. I examined her and then, as I sat down to write a prescription, she pleaded: "Doctor, don't experiment-whatever the last resort is, use it first!" -HUGH MCCULLOCH JR., M.D. why is diffusion important?

Because the active ingredients of a spermicidal preparation must diffuse rapidly into the seminal clot and throughout the vaginal canal to be clinically effective. Lanesta Gel offers this dual protection. Its four spermicidal agents quickly invade the clot to stop the main body of sperm. Lanesta Gel spreads evenly and quickly throughout the vaginal canal — seeks out every wrinkle and fold that may offer concealment to sperm. With this rapid diffusion, your patient receives the full benefit of the swift spermicidal action of Lanesta Gel — in minutes — a decisive measure in conception control.

Lanesta Gel with a diaphragm provides one of the most effective means of conception control. However, whether used with or without a diaphragm, the patient and you, doctor, can be certain that Lanesta Gel provides faster spermicidal action – plus essential diffusion and retention of the four spermicidal agents (7-chloro-4-indanol, ricinoleic acid, sodium lauryl sulfate, sodium chloride) in a position where they can act upon the spermatozoa.

Supplied: Lanesta Exquiset* . . . with diaphragm of prescribed size and type; universal introducer; Lanesta Gel, 3 oz. tube, with easy clean applicator, in an attractive purse. Lanesta Gel, 3 oz. tube with applicator; 3 oz. refill tube — available at all pharmacies.

new

A product of Lanteen® research.

Manufactured by Esta Medical Laboratories, Inc., Alliance, Ohio Distributed by GEORGE A. BREON & Co., New York 18, N. Y.

the bers broons: and ence pace p in ou'll any the

The rav-

ork.

get

rom

find

END

A PIONEER IN VITAMIN RESEARCH Merck Sharp & Dohme

REDIPLETE AND DROPS

Announces 3 new pediatric v

the following Minimum Daily

KEDIPLETE & AUG DRUPS	Requirem	ents (MDR):	
Each 0.6 cc. contains:	Infants	Children	
Vitamin A 1.5 mg(5,000 U.S.P. units). (Synthetic)	3.3 MDR.	COMMON TOWNS	
Vitamin D 25 mcg(1,000 U.S.P. units). Vitamin C			
Supplied: 15 cc., 50 cc., both in amber plastic calibrated dropper (0.3 and 0.6	cc.)		
REDIPLETE.	Each 0.6 cc. supplies the following		
POLYVITAMIN DROPS	Minimum Daily		
PULTVITAMIN DRUPS	Requirem	ents (MDR):	
Each 0.6 cc. contains:	Infants	Children	
Vitamin A 1.5 mg(5,000 U.S.P. units). (Synthetic)	3.3 MDR	1.7 MDR	
Vitamin D 25 mcg(1,000 U.S.P. units).	2.5 MDR.	2.5 MDR	
Vitamin C75 mg.			AND DESCRIPTION OF THE PARTY OF
Pyridoxine HCI (8 ₆)1 mg	(Minimi	um Daily rement	
	not esta		27 100
Riboflavin (B2) 1 mg.	2 MDR	2 MDR	
Thiamine HCI (B ₁)1 mg	4 MDR	1.5 MDR	
Cyanocobalamin (B ₁₂)3 mcg	Requir	ement blished	0
Nicotinamide10 mg.			
Supplied: 15 cc., 50 cc., both in amber			2 4
plastic calibrated dropper (0.3 and 0.6		separate,	
practic carrates arapper to a una u.a t			Berlin Co. Land
REDIPLETE.	Each 5 cc	sumplies	
	the fol		DEDIDI ETE
PEDIATRIC SYRUP	Minimu		REDIPLETE.
Each 5 cc. (1 teaspoonful)	Requireme		
contains:	Infants	Children	ADC DROPS
Vitamin A 0.9 mg(3,000 U.S.P. units) (Synthetic)	2 MDR	1 MDR	
Vitamin D 25 mcg(1,000 U.S.P. units)	2 5 MDB	2.5 MDR	Annual reference Property Co.
Vitamin C50 mg.			The Control of the Co
Pyridoxine HCI (B ₄)1.0 mg	(Minimu	m Daily	No. of Concession, Name of Street, or other party of the Concession, Name of Street, or other pa
	Require		No.
	mos estat	Cheddin	Total Control of the
Riboftavin (B2)1.5 mg	2.5 MDR	1.7 MOR	
Thiamine HCI (B1)1.5 mg.	6 MDR2	to 3 MDR	
Cyanocobalamin (B ₁₂)5 mcg			
	Require		
	not estat		24 / 1801
Nicotinamide10 mg.		1.3 MDR	- 511
Plus preservative and nitrogen propeller		4.0	ALC: NO
Supplied: 8-oz. delivery in 12-oz. aerosol		18 20 5	Market To the Control of the Control
seamless can		44.	

ric vitamin formulations and promote health

to help of greatest metabolic activity



additional information, write Professional Services, Merck Sharp & Dohme, West Point, Pa.



MERCK SHARP & DOHME DIVISION OF MERCK & CO., INC. WEST POINT, PA.



Relax painful skeletal muscle spasm-WITHIN MINUTES

with Robaxin

Injectable

A "safe, convenient medication" for "immediate relaxation" of acute skeletal muscle spasm. Has "a high potential" for prompt relief, usually within minutes after administration.

Maintain pain-free relaxation-WITHOUT DROWSINESS

with Robaxin TABLETS

For initial relief, or to maintain relaxation originally induced by Robanin Injectable. Highly potent and long acting *6 — and virtually free from causing drowsiness, or other adverse side effects. 1.2.2.6 For one group of patients with low back disorders, Robanin Tablets shortened hospital stay an average of 4.54 days per patient. 2

NINE PUBLISHED STUDIES with 374 patients show ROBAXIN Injectable and ROBAXIN Tablets beneficial in 90% of cases.¹⁻³

Literature available to physicians on request.

SUPPLY: ROBAXIN Tablets, 0.5 Gm. (white, scored) in bottles of 50 and 500. ROBAXIN Injectable, each ampul containing 1.0 Gm. of methocarbamol in 10 cc. of sterile solution.

REFERENCES: 1. Carpenter, E. B.: Southern M. J. 51:627, 1958. 2. Forsyth, H. F.: J.A.M.A. 167:163, 1958. 3. Grisolia, A., and Thomson, J. E. M.: Clin. Orthopaedics 13:299, 1959. 4. Lewis, W. B.: California Med. 90:26, 1959. 5. O'Doherty, D. S., and Shields, C. D.: J.A.M.A. 167:160, 1958. 6. Park, H. W.: J.A.M.A. 167:168, 1958. 7. Plumb, C. S.: Journal-Lancet 78:531, 1958. 8. Poppen, J. L., and Flanagan, M. E.: J.A.M.A. 171:298, 1959. 9. Schaubel, H. J.: Orthopedics 1:274, 1959.

A. H. ROBINS CO., INC., Richmond 20, Virginia

Making today's medicines with integrity . . . seeking tomorrow's with persistence.

THIT



Used in hospitals and doctors' offices for over fifty years as a local and general anesthetic through refrigeration or inhalation, Gebauer's Ethyl Chloride in the 100 gram metal tube is also an important element of the modern doctor's emergency kit. Unbreakable, leakproof, ready for instant use, its finger-tip control valve directs a spray or jet stream depending upon degree of anesthesia desired.

Ethyl Chloride is also available in the dispenseal amber bottle with its choice of three nozzle openings: fine, medium or coarse jet spray. Widely used as a local anesthetic for minor surgical procedures and the alleviation of needle pain during hypodermic injections, Gebauer's Ethyl Chloride is guaranteed to retain its purity and remain unchanged indefinitely. Gebauer Chemical Company, 9410 St. Catherine Ave., Cleveland 4, Ohio.

Makers of:

FLURO-ETHYL

210 MEDICAL ECONOMICS · MAY 23, 1960

GEBAUER

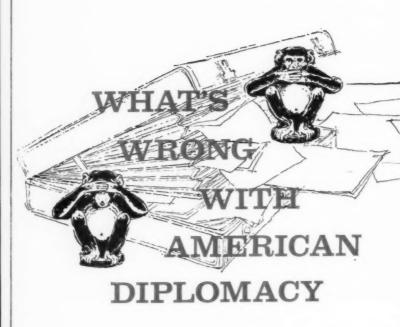
MEDICAL ECONOMICS Book Feature

In this department, MEDICAL ECONOMICS presents book condensations of a type never available before. Only books of a thought-provoking, nonmedical kind are condensed. But the condensing is directed by editorially experienced physicians. Readers thus get a medical man's view of the best in nonmedical contemporary thought. Among the hard-hitting best sellers that informed people are reading and talking about this month is Emmet John Hughes' "America the Vincible." A selection from this book starts on the next page. The editors take pleasure in bringing it to you as another of the MEDICAL ECONOMICS Book Features.

ver fifty alation, portant kproof, stream

with its
Widely
eviation
oride is
initely.
1, Ohio.

ER

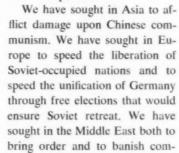


Condensed from the best-selling book
"America the Vincible"*

By Emmet John Hughes

°Copyright © 1959 by Emmet John Hughes. Published by Doubleday & Co., Inc. We enter this Age of Explosion with full awareness that the planet itself may shatter, as penalty for another failure in the quest for peace. Nevertheless, the diplomacy of America since World War II has given few signs of the wis-

dom of experience.



munism. And we have sought, through all these years, to practice diplomacy in such a way as to evade direct negotiation with Soviet communism.

But peace is no less precarious than one decade ago.

The might of Soviet communism is more massive than ever.

There is something remarkable in the failure of our nation to attain *any* of its purposes. A diplomacy so unavailing calls for dissection.

What Went Wrong?

The history of America seems an invitation to illusion. We won a continent without ever meeting the great conflicts, the harsh decisions attending almost all imperial adventure. We became the match of empires—untutored in the methods of empire. We, as a people, missed most of the education of a great nation.

Thus the aggressive thrust of communism's "permanent Continued on page 216

213

book ble"*

ughes

Hughes. Co., Inc.

LEDERLE NUTRITIONAL FORMULAS



GEVRAL

Capsules Vitamin-Mineral Supplement

Effective general supplement for the family to en-

sure optimal nutritional status. Fourteen vitamins, eleven minerals in each dry-filled capsule. Packaged in the decorative dining-table jar. Just 1 capsule daily.



GEVRABON

Liquid Vitamins-Minerals

Unique sherry-flavored liquid supplement particularly favored by senior citizens.

Essential vitamins-minerals in attractive decanter bottle (16 oz.). 2 tablespoonfuls daily . . . plain . . . chilled . . . over ice . . . or as they like it.



GEVRINE

Vitamins-Minerals-Hormones

For the elders - comprehensive nutritional sup-

port with androgen and estrogen for proper bone and protein metabolism. Helps reduce or correct tissue atrophy, asthenia, clinical osteoporosis, postmenopausal changes, "aging" mentality, Usually 1 capsule daily. Bottles of 100 and 1,000.



FOR COMPLETE FORMULAS SEE 1960 PDR Pages 697-698

aminsneralsmones

e elders rehensive onal supd estrogen rotein meor correct ia, clinical enopausal tality. Usu-Bottles of



Vitamin-Mineral-Protein Supplement

High protein (60 per cent) supplement plus 26 vitamins-minerals . . . to correct or prevent deficiencies, nitrogen imbalance. Ideally suited to those making a general physical "comeback." In ½ lb. jar or 5 lb. can. New delightful recipes available on request. Excellent for tube feeding.



GEVRAL T

Capsules

Therapeutic Vitamins and Minerals

High potency formula . . . broad coverage . . . for intensive treatment of overt or incipient nutritional failure. 28 factors-including all oil-soluble vitamins, all B-complex, amino acids. Indicated for the convalescent or whenever requirements are abnormally high. In attractive dining-table jar. Usually 1 capsule daily.



EDERLE LABORATORIES . A Division of AMERICAN CYANAMID COMPANY . Pearl River, New York | Lederle





AMERICAN FOREIGN POLICY "reminds me of only one thing: a dead man in one of your jammed subway crowds. He looks alive only because he is held up by the crush of the people." This vivid quote from a European journalist keynotes Emmet John Hughes' "America the Vincible," the best-selling book that suggests how we can pump new life into American diplomacy. Until recently joining the staff of the Rockefeller Brothers as Senior Adviser on Public Policy, Mr. Hughes was head of the foreign news service of Time-Life-Fortune. Earlier he helped with speech-writing in both Eisenhower Presidential campaigns. He served for the year 1953 in the White House as an Assistant to the President. Foreign affairs have been his business for twenty years, more than half of which he spent in Europe. A post on the staff of the American Embassy in Spain gave him his "elementary education in diplomacy." His diagnosis of our plight: a dangerous addiction to simple falsehoods. For his Rx, see the accompanying text.

revolution" could be confused with the simple lust for power stirring leaders of a hostile land.

Thus the strength of Soviet technology and science could be forgotten, as reflecting nothing more historic than the theft of American secrets by traitors and spies.

The land of such illusion is no fit home for free men. For judgment demands three things of a nation: It must accurately appraise its own strength. It must fully face the circumstances in which it must act. It must assess the true power of forces pitted against it.

A New Look at Russia

The sovereignty of communism has swept, in forty years, from presidency over a meeting hall in Petrograd to rule over one-third of the people on earth. The source of this sovereignty, the Soviet Union, has, for the first time in history, brought under a single government 208 million people. It spans the land mass of 8,600,000 square miles that lies between the Elbe River and the Pacific Ocean.

Power in this vast expanse is centralized, to a degree never before known, in the Communist Party. Perhaps never before in history have so many bowed so low to so few.

Economically, this sovereignty has mastered an industrial power and technological skill with a speed never before matched. Militarily, this state stands without rival in strength of traditional armies. And—again, for the first time in history—a state controlling the heartland of Eurasia has also achieved a power at sea capable of deterring, if not destroying, the armadas of any enemy.

This is not all. This robot has a brain, and this machine has a purpose. For this is no mere empire: It is an idea.

Power and Politics Fused

The strength of the Soviet Union lies in something more than infantry divisions, fleets of submarines, or flights of missiles. It lies in the readiness to use these things—not in their ultimate military nature, but in the service of Soviet politics in time of

ad

ly

hn

at

y.

rs

of he

se

iis

in

in

ls.

"peace." Power and politics are fused.

As individuals, the revolutionary leaders of the Soviet Union have lived with danger. Familiarity with peril has bred a little contempt for it.

As a *nation*, the lesson has been learned again. The Soviet Union, during the ordeal of invasion in World War II, lost territorial control over 45 per cent of its population and 33 per cent of all its industry. It knows the devastation that can be endured and yet permit survival. The

word "survival" thus lacks the alarming ring of finality it brings to other nations.

Swaggering Diplomacy

Soviet diplomacy is marked, perhaps above all else, by the confidence of its manner. It welcomes risk for the promise of gain—from Berlin to Baghdad. It throws its best wares before the sight of the world—from Bolshoi to Sputnik. It shows an audacity that an earlier age used to describe as an American quality.

Continued on page 222



213 MEDICAL ECONOMICS - MAY 23, 1960



ie

of

e

1-

1-

a new class of drug for the relief of pain



analexin

the first analgomylaxant of a single chemical that is both a general non-narcotic analgesic and an effective muscle relaxant

Analexin is a new synthetic chemical^{1,2} which produces (1) analgesia by raising the pain threshold and thus decreasing perception of pain and (2) muscle relaxation by selectively depressing polysynaptic transmission (interneuronal blockade), abolishing abnormal muscle tone without impairing normal neuromuscular function. The analgesic potency of one tablet is clinically equivalent to 1 grain of codeine; yet, Analexin is neither narcotic nor is it narcotic-related. Its muscle relaxant effect is comparable to the most potent oral skeletal muscle relaxants available.^{3,4}

Analexin for relief of pain and skeletal muscle tension. Each tablet contains 200 mg. of phenyramidal HCI. Dosage—1 tablet every 2-4 hours or as needed.

Analexin-AF for relief of pain and skeletal muscle tension complicated by fever and/or inflammation. Each tablet contains 100 mg. of phenyramidal HCl and 300 mg. of aluminum aspirin. Dosage—2 tablets every 4 hours or as required.

220 MEDICAL ECONOMICS · MAY 23, 1960

in low back pain, arthritis and other musculoskeletal disorders... where pain makes tension and tension makes pain

stops both effectively

Phenyramidol HCl (Analexin) was evaluated by Batterman, et al.5 in a series of 118 ambulatory patients with various painful musculoskeletal disorders. These patients were observed for periods as long as 22 weeks. The authors conclude: "Not only is satisfactory relief of painful states achieved in the majority of patients regardless of etiology and duration of pain, but there is also no evidence suggestive of cumulative toxicity. Furthermore, in contrast to codeine and meperidine, the likelihood of untoward reactions occurring in ambulant patients is not high. This is a decided advantage since the control of pain in the ambulant patient with chronic pain is a major clinical problem."

In other studies, Bealer's used Analexin in 26 cases of musculoskeletal pain and observed good or very good results in 11 patients; fair results in 14 and 1 case was unsatisfactory. Fifteen other patients were given Analexin-AF, and good or very good results were obtained in 13 out of 15 of these cases.67

Meister IRWIN, NEISLER & CO.

Decatur, Illinois

XPMY: 1. Gray, A. P., and Heitmeier, D. E.: J. Am. Chem. Soc. 81:4347, 1959. 2. Gray, A. P., et al: J. Am. Chem. Soc. BBLIOGRAPHY: I. Cary, A. P., and retimeter, D. E. J. A. Mr. Chem. Sec. 61:6349, 1797. 4. Gray, A. P., and retimeter, D. E. J. A. Mr. Chem. Sec. 61:6349, 1799. 3. O'Dell, T. B.; Wilson, L. R.; Napoli, M. D.; While, M. D., and Mirsky, J. H. J. Ped. Proc. 18:1694, 1959. 5. Bettermon, B. C.; Grossman, A. J., and Mourateff, G. J.; A. M. J. Med. Sc. 238-315, 1999. 6. Bealer, J. D. Clinical Report 511:592, April 1, 1959. 7. Stern, Ea Clinical Report 511:599, May, 1959. (Clinical Reports in file of Medical Department, Irwin, Neisler & Co.)



MEDICAL ECONOMICS . MAY 23, 1960 221

ical 10

ne pain ectively muscle of one otic nor nt oral

mg. of

and/or luminum

It is creative to the point of seeming caprice. With equal alacrity and acumen, it will export culture or cement, encourage national revolution or international conference.

Its economic offensive has been steadily quickening. Barely one-half as much as the American investment has allowed Soviet aid to exceed American aid in the half-dozen nations selected by political decision: Afghanistan, Ceylon, Egypt, Indonesia, Syria, and Yemen-with Iraq joining the favored company in 1959. For every economic act is

timed and tuned for political effect.

A football stadium for Rangoon in Burma was disapproved by American technical judgment as failing to serve useful economic purpose. But Soviet engineers built it, a monument of pleasure to the people and a reminder to all diplomats of Soviet constancy to political purpose.

And this Soviet diplomacy has a quality much to be coveted: a sense of humor. The complacence of a professional entertainer marks Premier Nikita Khrushchev. Smiling rather like a care-

MYTHS THAT MAR OUR FOREIGN POLICY

We like to believe that a free society assures strength and that tyranny is a sign of weakness.

Fractions of truth here, but we forget that tyranny boasts its own devices. Fear can be as sharp a spur to action as profit.

We like to believe that the innate strength of freedom and the innate weakness of tyranny assure the victory of the free. The young who in 1956 died on the streets of Budapest would

teach us that free men can, and do, die in vain.

We like to believe that-since public debate within a nation promotes freedom-negotiations between nations, through diplomacy, should never be secret. Juries do not deliberate in public. -From "America the Vincible"

Ranoved ment nomneers isure er to ancy

d: a iplatainusheare-

has



in severe mental and emotional stress,

Thorazine, one of the fundamental drugs in medicine, provides prompt control of symptoms—especially agitation and hostility.

SMITH KLINE & FRENCH

MEDICAL ECONOMICS · MAY 23, 1960 223

lessly shaped Buddha, he can remark that Soviet communism will be humbled "when the shrimps whistle." Or, when American diplomacy assumes a posture of righteous wrath, "We advise all who try to rattle the saber, if you have got the jitters, take a cold shower and calm down." Or, "We want a thaw, but if you want it colder, we can add to it."

More

REVERSE-TWIST TRUTHS IN DIPLOMACY

A thing worth doing at all is worth doing imperfectly. All wartime alliances and all peacetime coalitions must fall short of ideological purity. A quest for perfection can only find no deed desirable, no unity attainable, no peace possible, and would end in nothing.

Peace is divisible. Peace can never be either universal or eternal. It can only be sought in a particular place and detained for a passing time. And in diplomacy the slow labors of negotiation, groping and clawing for pieces of hope, gradually make for greatness of statecraft.

One head is almost always better than two. Consistence, conciseness, and precision are virtues most wanted by diplomacy. And there can be no more probable origin to such virtues than a single source: one man or one nation. Within a government, the conduct of foreign policy becomes baffled by the intrusion of many agencies. And within a coalition of nations, the price for great number, more often than not, must be paid in hesitance of action and vagueness of method.

Better never than late. The road to ruin, for many a nation, has been paved with ill-timed intentions. A simple formula for disaster is the spirited rush to save a situation already lost.

History never repeats. Each conflict differs from all other conflicts with the conditions of the event, the opinions of the people, the weapons of the moment. The adversary never is a simple facsimile of the most recent foe.

-From "America the Vincible"

in senile agitation, Thorazine®, one of the fundamental drugs in medicine, can control the agitated, belligerent patient and help her live a composed and useful life.



SMITH KLINE & FRENCH

MEDICAL ECONOMICS . MAY 23, 1960

e sa-

tters,

haw,

ore

In this confident spirit, early in 1959, he received a visitor to Moscow, the Prime Minister of Great Britain. The amenities first satisfied the guest, who was heard to make the observation: "I feel like the lion who discovers that the bear's hug doesn't break his ribs."

In a matter of hours, he felt a different sensation. The Soviet Premier delivered a speech mocking a Western suggestion of a Foreign Ministers' meeting. Two days later, as the British Prime Minister prepared for a flight to see the Ukranian capital of Kiev, the Soviet Premier excused himself from their planned journey—professing to have an aching tooth.

Was it a diplomatic insult, or was the cavity real? The United States Senate echoed with the word "war." A few voices began to speak of "mobilization." Then, on the eve of the British Prime Minister's departure from Moscow, the Soviet Premier blandly agreed to a Foreign Ministers' meeting.

To many, the Soviet Union can evoke special awe. In an age

of revolution, it is revolution. In a world of nations clamoring with ancient want, it answers immense need with immense promise. In this single generation, it has been a nation in want —and become a nation of power.

Russia's Secret Strength

As the chasm widened between the wealthy West and the impoverished nations of Africa and Asia, the example of the fortunate few has grown ever more remote. And the example of the Soviet Union has seemed steadily to grow more relevant. The greatness of the West excites envy, while the greatness of the Soviet Union excites emulation.

And thus can the historic image of America be replaced. Long the image of hope to all nations aspiring to freedom, America can come to seem too cold and distant an idol to inspire the new cult praying for economic security.

Nor is the widespread hospitality to Soviet policy confined to economic matters. It extends to the political.

*More**

on. In moring nswers mense eneran want power.

the ded bend the Africa of the never tample eemed devant. est exness of emula-

to all eedom, em too inspire econ-

hospiined to
ends to
More

in pain, such as that of cancer, Thorazine,

one of the fundamental drugs in medicine, reduces by potentiation the amount of narcotic needed; alleviates the anxiety that intensifies suffering; improves the patient's mental outlook. Also, controls nausea and vomiting.



SMITH KLINE & FRENCH

MEDICAL ECONOMICS . MAY 23, 1960 227

To the West, the political formulas of Soviet communism seem primitive. All its pretenses seem fantastic and demented whenever Moscow becomes the scene for another murderous struggle, or vulgar scuffle, for power.

But the Soviet political device can appeal to some peoples because of its clarity and comprehensibility.

Thus the politics of the African tribe are elemental. Chieftains choose themselves by power or prestige. Authority con-

tinues unchanged so long as the decisions are "good," which merely means successful. Political change comes, quite commonly, with execution of the chieftain. And a new regime begins.

The political talents of many a new nation of Africa or Asia have not risen far above this tribal conception. To such nations, the rude methods of Soviet rule may fail to shock. They may, rather, seem to invite.

As we witness the rush of rev-Continued on page 232



Dosage: Usually 1 tablet (50 mg.) t.i.d.

When used in combination, dosage should be correspondingly reduced.

Minimal side reactions

Nonsoporific

No known organic contraindications

Trailman. Fiscounters streeged & Bibliography and file card Onstruction for Street Section 2 available on request.



t



Cuts Medical Office Expense. You'll save money on paperwork with the speed and simplicity of "Thermo-Fax" Copying Machines. Itemized statements made at the rate of 250 an hour. Patient histories copied with no transcribing. In 4 seconds these all-electric machines copy directly from an original—with the clean, dry copy on white, bond-weight paper or on any of 6 colors. To see all this copying can do, call your dealer. Or mail the coupon.





MINNESOTA MINING AND
MANUFACTURING COMPANY

THE TERM "THERMO-FAX" IS A REGISTERED TRADEMARK
OF MIRRESOTA MINING AND MANUFACTURING COMPANY

Minnesota Mining and Manufacturing Co. Dept. DBN-5230, St. Paul 6, Minnesota

Name_____

Address

City____Zone__State___

MEDICAL ECONOMICS · MAY 23, 1960 229

ions

e

a

Now you can predict to your allergic patients...

"Within an hour your allergic symptoms will subside and you'll remain alert."





olution across the continents, we imagine we hear the simple sound of nationalism. But the clamor tells of a political force profoundly new.

Revolutions by the Dozen

The unity of the Arab world marks, not respect, but disdain for national frontiers. The supreme economic need of the Middle East, which is water, binds the whole area in a single, specific want. The leadership of Egypt is asserted, not by conquest, but by political contract with the separate state of Syria to create a United Arab Republic.

The continent of Africa see thes with the same struggle toward new political institutions. Here few "national" boundaries even exist. Here the common enemy is colonialism.

Thus the Republic of Guinea (a nation about the size of Oregon), promptly after becoming independent of France in 1958, declared its union with the state of Ghana. Thus the President of Guinea, young Sekou Touré, has exclaimed, "All Africa is my problem!"

And through the nearer continent of Latin America, there have been like forces of revolution striking across national boundaries. The assaults upon dictatorships have come in the swift succession of a common cause and shared spirit. Weapons for Castro's revolution in Cuba in 1959 came from friendly revolutionary regimes in Costa Rica and Venezuela.

In Asia too, colonialism retreats. And the vacuum of power has come quickly to be filled by a new China. This China, unlike the old, is great in economic and in military power. And its own revolution has carried it both to new strength and to new conflict with the West—allied as it is to the Soviet Union.

More than half a century ago, a brooding Henry Adams had an ugly dream: He worried lest the "vast force of inertia known as China was to be united with the huge bulk of Russia in a single mass which no amount of new force could henceforth deflect." The philosophic fantasy has become the political fact.

Continued on page 236



"All my convalescent patients get an extra lift with 'Beminal' Forte"

improve nutrition accelerate recovery with

BEMINAL FORTE Therapeutic B Factors with Vitamia C

A single capsule provides 250 mg. of vitamin C and massive doses of B factors to meet the need when requirements are high and reserves are low. Prescribe "Beminal" Forte during convalescence, pre- and postoperatively, and for patients on special diets to improve the prognosis and accelerate recovery.

Supplied: No. 817 - Bottles of 100 and 1,000 capsules.

Ayerst Laboratories · New York 16, N. Y. · Montreal, Canada

ntiere wonal oon the oon ba ba ev-

reby ke nd wn to

ict

30,

an

he

as

he

gle

ew

t."

e-

36



Satisfied with seldom a hungry cry

"Personal experience with the hunger of infants fed even 3.5 Gm. [of protein] per kilogram makes us unwilling to recommend intakes of cow's milk which would give less protein. Although the determinants of food intake are complex, the possibility exists that unmet nutritional needs may make the intake of 3.5 Gm. and more of cow's milk protein per kilogram necessary..."

LACTUM supplies the high protein level of modified milk formulas that has been used so successfully in the feeding of infants. In Lactum 16% of total calories is derived from protein.

¹ Gordon, H. H., and Gunzon, A. F.: J. Pediat, 54:503 (April) 1959

for those who prefer higher protein levels

Lactum

Liquid and 'instant' powder

Modified milk formula



In such an age, even the "permanent revolution" of Soviet communism itself must fail to be "permanent" or consistent in its practices. Within the Soviet Union, stresses of change and conflict help shape national policy.

We Try to Stand Pat

We know that America has seemed, through much of the past, to surge ahead in a world that almost stood still. Now America cannot dare stand still n a world so stirring with change. For the nature of America, the idea of America, the proud political experiment, cannot even survive if it seeks only to be a still and silent witness to the new age of politics.

Yet we have acquired many manners of the closed society.

'See No Evil, Hear No Evil'

We have practiced such a control of passports as to hint to the world that we feared their seeing or hearing many of our citizens. We have disciplined the freedom of our own press to move in foreign lands—as if Chinese Communists would suffer by being spared the inquiry of American journalists. We have shown indifference to the speaking—literally—of the languages of others.

In 1958, it was reported to the President that one-half of all the officers of the Foreign Service had speaking knowledge of not a single foreign language. Among new men entering the Foreign Service, linguistic ignorance rose to 70 per cent. And in all the nations of the Communist empire, only one American ambassador could speak the language of the land. Such negligence hints of a closed mind.

We Shy Away

America has spent the greater part of a decade in contriving delay of negotiation with Soviet diplomacy.

Sometimes it is argued that since the leaders of the Kremlin include assassins and atheists, therefore no decent diplomacy should be caught in the same conference room with them. But it is not explained what penalty these leaders are expected to suffer by being left alone.

Sometimes it has been argued

why Willoughby was perplexed

SURGICAL RESIDENT: I hear that Willoughby, one of our interns, was puzzled about the Chief's recommending Azotrex for Mr. Blaine's bladder infection. Did Willoughby really lecture the Chief on the evils of combination antibacterial drugs? UROLOGY RESIDENT: He did, but the Chief straightened him out. He admitted that combinations are often misused. But Mr. Blaine, with a bladder infection, was in pain, and furthermore it will take a couple of days before we get the lab report. Mixed infections are common. And since the tetracycline and sulfa in Azotrex are effective against the gram-positive and gram-negative bugs usually found, we could start therapy right away.

SURGICAL RESIDENT: Makes good sense, so far.
UROLOGY RESIDENT: Also, the good blood levels
with tetracycline phosphate complex
help eradicate the deeper foci of infection and
sulfamethizole gives high urinary sulfa
concentrations without crystalluria.

SURGICAL RESIDENT: Say, how come you remember so much? Are you reviewing pharmacology for your "boards"?

UROLOGY RESIDENT: I jotted down some notes. Anyway, the Chief likes the way the azo dye in AZOTREX rapidly relieves pain. Also, it is easier for a sick person to swallow a single capsule instead of three.

SURGICAL RESIDENT: A sound approach. How about lunch?

UROLOGY RESIDENT: Good idea. Shall we go to the staff lounge?

Azotrex®

BRISTOL LABORATORIES
SYRACUSE, NEW YORK

 AZOTREX CAPSULES. Each capsule contains:

 TETREX®* (tetracycline phosphate complex equivalent to tetracycline HCl activity)
 125 mg.

 Sulfamethizole
 250 mg.

 Phenylazo - diamino - pyridine HCl
 50 mg.

 Supplied: Bottles of 24 and 100 capsules

U.S. PAT. NO. 2,791,609

MEDICAL ECONOMICS · MAY 23, 1960 237

inter-

ers.

the

the

rice

ot a

ong

ign

ose

na-

ire.

dor

the

of a

ater

de-

di-

that

nlin

ists,

ame But alty suf-

gued

that Eastern Europe's nations subject to Soviet rule would despair at the sight of Soviet-American negotiation. But the argument equates negotiation with American ratification of Soviet conquest.

A test of this came in 1959 with the visit of the American Vice President to Poland en route from Moscow. The spontaneous cheers of Warsaw throngs mocked the notion that Soviet-dominated people would deplore any American action such as this, implying diplomatic tolerance toward their unwanted masters of the moment.

Sometimes it has been contended that the danger of negotiations is proved by the simple fact of Soviet desire for them. This seems a curious contention:

It assumes Soviet policy to be as passionately eager for negotiation as it always professes. It makes no allowance for the freedom with which Soviet diplomacy has been able, for many years, to issue such professions precisely because it had confidence that America would spurn the overtures. Finally, it is irra-

tional. It reads an adversary's professed readiness for negotiation as a kind of dire warning instead of as an encouragement, indeed a prerequisite.

Sometimes it has been argued that only some prior assurance of success can justify serious diplomatic encounter. As the President has observed, "A feeling of pessimism and, in a way, hopelessness, I think, would be increased if you entered such a meeting and then nothing really came out of it."

Conscientious though such caution be, it falls short. It warns only against public diplomacy. It has little relevance to more traditional and discreet diplomatic conversation. And it also takes small account of the "pessimism" and the "hopelessness" of many nations as they face the world's division without all ways, all hopes of negotiation being exhausted.

Aloofness Harms Us

There are compelling reasons why American policy cannot continue in its reticence toward negotiation.

More

Proven

in over five years of clinical use

Effective

FOR RELIEF OF ANXIETY AND MUSCLE TENSION

Outstandingly Safe

Simple dosage schedule produces rapid, predictable tranquilization without unexpected excitation. No cumulative effects, thus no need for difficult dosage readjustments. Does not produce ataxia, change in appetite or libido. No danger of hypotension, depression, Parkinson-like reactions, jaundice or agranulocytosis. Does not impair mental efficiency or normal behavior.

Miltown **

Usual dosage: One or two 400 mg. tablets t.i.d.

Supplied: 400 mg. scored tablets, 200 mg. sugar-coated tablets; or as MEPROTABS°-400 mg. unmarked, coated tablets.

WALLACE LABORATORIES / New Brunswick, N. J.

BIRADE-MARK

MEDICAL ECONOMICS · MAY 23, 1960 239

XUM

iaing nt,

ed of

losi-

of ne-

lly

ch

ns

It fi-

tic

es

n"

ny

l's

all

X-

ns

ot

rd

The regular conduct of nearroutine diplomacy has been affected. For years the American Embassy in Moscow has been divested of serious duty. Its Ambassador has served as little more than official messenger for communications phrased in Washington. His counsel has rarely been invited. His initiative, all the practice and probing of personal diplomacy, has been discouraged.

'Report No Evil'

The same symptoms have spread to our other embassies around the world. The Ambassador in Germany quite commonly has received his knowledge of Washington's policies, not by an official dialogue in which he takes part, but by reading the newspapers. The Ambassadors in France or Great Britain have shied either from knowledge of the fact or reporting of the fact-so that they could allow Washington to display astonishment at the 1956 Anglo-French action in Egypt. The Ambassador in Cuba could let Washington greet with similar

amazement the overthrow of a Batista and the power of a Castro.

Everywhere—as all officers of the Foreign Service privately lament—there has been a general softening of all political reporting from American embassies, to avoid conflict with illusions cherished in Washington.

Dead End Ahead?

The future promises to be worse. For evasive diplomacy can only commit the nation to hold fast to weapons and assets whose value must fall.

The past gives proof. The purpose of "negotiation from strength," proclaimed when America enjoyed its brief monopoly of atomic power, has lagged to a time, not of greater strength, but of less strength. American military bases around the world are now under easy range of Soviet missiles. The American—and the NATO—military presence in Germany must decline in importance precisely as Germany's own military divisions rise.

Continued on page 245

pot

Consi

if ede

pressi

tively

Esidr Singo Esidr matio

potentiated therapy for mild to moderate hypertension

Consider the benefits of Singoserp-Esidrix if it's mild to moderate hypertension (especially if edema is a complicating symptom). Singoserp, a man-made analog of reserpine, lowers blood

pressure but seems to cause fewer side effects than natural rauwolfia compounds. When Singoserp is potentiated by Esidrix, blood pressure is lowered more effectively than with single-drug therapy. SUPPLIED IN TWO STRENGTHS: Singoserp-Esidrix Tablets #2 (each containing 1 mg. Singoserp and 25 mg. Esidrix) and Singoserp-Esidrix Tablets #1 (each containing 0.5 mg. Singoserp and 25 mg. Esidrix). Complete information available on request.

Singoserp—Esidrix*
mation available on request.

CIBA

E/2764W9

of a Cas-

rs of y laneral portes, to cher-

can hold hose

The from hen mohas eater ngth. ound easy The

any

pre-

itary

245

announcing a new product..



XUM

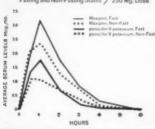


MAXIPEN.

MAXIMAL ABSORPTION Acid stable, extremely soluble. MAXIPEN is rapidly absorbed from the gastrointestinal tract.

MATIGAL BLOOD LEVELS Substantially higher than potassium penicillin V (higher levels than with intramuscular procaine penicillin G). You get injection levels with a tablet.

COMPARATIVE ORAL SERUM LEVELS*
Fasting and Non-Fasting States / 250 Mg. Dose



*Based on 3294 individual serum antibiotic determinations. Complete details on request.

MAXIMAL FLEXIBILITY May be administered without regard to meals. However, highest absorption is achieved when taken just before or between meals,

MAXIMAL ORAL INDICATIONS Indicated in infections caused by streptococci, pneumococci, susceptible staphylococci, and gonococci, including:

pneumococcal pneumonia gonorrhea tonsillitis laryngitis otitis media streptococcal pharyngitis

impetigo susceptible staphylococcal abscesses (with indicated surgery) cellulitis lymphangitis pyoderma

Also prophylactically in secondary infections following tonsillectomy, dental extractions, other surgical procedures.

Dosage: For moderately severe conditions, 125 to 250 mg. three times daily. For more severe conditions, 500 mg. as often as every four hours around the clock.

Note: To date, MAXIPEN has not shown less allergic reactions than older oral penicilins. Usual precautions regarding administration should be observed.

Supplied: MAXIPEN TABLETS, scored, 125 mg. (200,000 units) bottles of 36; 250 mg. (400,000 units) bottles of 24 and 100. MAXIPEN FOR ORAL SOLUTION; reconstituted each 5 cc. contains 125 mg., in 60 cc. bottles.

Triumph of Man Over Molecule Designed by Pfizer for Maximal Benefit



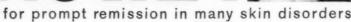
New York 17, N.Y. J. B. Roerig and Company Division, Chas. Pfizer & Co., Inc. Science for the World's Well-Being™

new clinical proof

N. H., 71-year-old female with dermatitis venenata, secondarlly impetiginized. Vesicular, crusted eruption of 6 weeks' duration.

NOV. 16 acleared in 8 days with terra-cortril

NOV. 24



terra-cortril

brand of oxytetracycline and hydrocortisone
TOPICAL OINTMENT

demonstrably anti-allergic, anti-inflammatory, anti-infective¹⁻³

Contains 3% oxytetracycline hydrochloride (TERRAMYCINe) and 1% hydrocortisone (CORTRILe).

Also available:

TERRA-CORTRIL EYE/EAR SUSPENSION for anti-inflammatory, anti-infective action in ophthalmic and otic disorders.

Lubowe: I. I.: Am. Pract. & Digest Treat. 7:962, 1956.
 Niedelman, M. L.: Ibid. 8:1753, 1957.
 Combleet, T., et al.: J. Invest. Dermat. 27:61, 1956.

Case report in files of Pfizer Laboratories Medical Department

PFIZER LABORATORIES Division, Chas. Pfizer & Co., Inc. Brooklyn 6, N.Y Pfizer Science for the world's well-being

Thus the political worth of both the military bases around the globe and the ground forces in Germany—the most prized assets of American strength—has already fallen into decline without their value, fast depreciating, being tested in negotiation with the Soviet Union.

They're Catching Up

What is true in the military arena has become no less apparent in the economic sphere. By all standards, the margin of superior American power has been shrinking.

The Soviet rate of industrial growth is an annual 9.5 per cent—enough to double industrial output in less than a decade. It far outraces the leisurely 3.6 per cent rate of American industrial growth. While America has been producing fifty times as many automobiles as the Soviet Union, the Soviet economy has been surpassing American production of machine tools by a ratio of four to one.

And the disparity in living standards between the Communist world and the Western world is narrowing. For Communist political strategy, this assures ever greater resources for carrying on economic warfare in Asia and Africa.

A Poor Stopping-Place

This American diplomacy, finally, could have some undesirable effects upon the Soviet Union. In the first place, the Soviet system of political power lives by tension—its people exhorted to stand stiff against foreign danger in a hopelessly divided world. Such an American diplomacy gives at least the appearance of accepting that dangerous division.

In the second place, such an American policy can have serious effect upon Soviet alliances, tightening that with Communist China. Soviet leaders such as Khrushchev and Mikoyan may privately express dismay at the prospect of Chinese population growth and the implicit challenge of Peking to Moscow as a second "holy city" of the Communist empire. Yet a wall of Western diplomatic silence must seem to

Continued on page 248

MEDICAL ECONOMICS · MAY 23, 1960 245

female enata.

inized.

uption

ration.

ent

MENT

lergic,

tive1-3

RIL®),

lable:

ISION

action orders.

2, 1956, 3, 1957, 31, 1956,

artment



To insure your

The

The lady looks for sheerness...you're after therapeutic support. There's one way to get both

Fact is, few women know the essential difference between support nylons and true elastic hosiery. They look for the words "sheer" and "support." No further.

Even the woman in serious need of relief from varicosities may not look any further. Unless, of course, she learns what to expect from elastic hosiery. Unless she understands the therapeutic value of nylon wrapped, rubber threads—the material that makes the critical difference between

THE KENDALL COMPANY

patient's cooperation...be sure she has

straight facts elastic stockings

the authentic compression you want and superficial pressure of stretch nylons.

The constant support of rubber She can see that nylon stretches. But she can't see that this is a lazy kind of stretch—with little return force.

With rubber in every supporting thread, Bauer & Black Elastic Hosiery provides positive, even pressure over the veins. With Bauer & Black Elastic Hosiery, she gets the therapy and prophylaxis you intend. She receives the relief she needs, with the sheer look she likes.

Fashionable 51 gauge sheerness

It should be pointed out to her, however, that she has to get the hose out of the box and on her legs to appreciate how much they look like her regular sheer nylons. Also, that when the replacement costs are averaged out, these long-wearing hose maintain true leg support at a cost between only 3 and 4 dollars a month.

As the world's largest maker, Bauer & Black is able to offer a full range of styles—for workaday wear, for casual dress or for formal occasions. Prices start at \$7.50 a pair ... expert fitting is available at all leading drug, department and surgical supply stores.

For literature on treatment and prevention of varicose veins by compression, write Bauer & Black, Dept. ME-5, 309 West Jackson Blvd., Chicago 6, Illinois.



Bauer & Black Elastic Hosiery

BAUER & BLACK DIVISION

MEDICAL ECONOMICS · MAY 23, 1960 247

our

after

e essen-

upport

y. They

d "sup-

us need

nay not

course,

n elastic

nds the

rapped,

al that

between

OMPANY

n

Moscow to be a more immediate threat than the walls of China.

In the third place, an American diplomacy persistently evading negotiation could only tend to seal Soviet rule of occupied nations. Lacking any political gain to justify military retreat from these areas, Soviet policy will need to hold them.

We Nail Shoes to Floor

We must have the courage to be inventive and imaginative in our diplomacy. As I have heard a distinguished American ambassador in Europe observe, "We should have learned by now that it is singularly difficult to fight a duel with your shoes nailed to the floor."

There would be political wisdom in opening America to Soviet travel, easing American travel to Communist terrain, welcoming scientists from Communist nations, inviting English-speaking Soviet students to American universities.

Strategy advises one never to lose contact with the enemy.

For example, there can be no full and effective accord on atom-

ic weapons, even with the Soviet Union, that does not bind Communist China. And thus whatever punitive value is attached to the diplomatic exile of China is fast disappearing.

The Weapon of Economics

We must understand that the slums of the world—from Calcutta to Havana, from Manila to Nairobi—will largely decree who will reside in the palaces and chancelleries of power.

One-third of the population of the "free world" produce 86 per cent of its manufactured goods, while two-thirds of mankind produce the remaining less than 15 per cent. This gulf promises to widen—with the surge of population growth almost doubling humankind every four decades. So the appeal of the Communist experiment has steadily increased in depressed areas.

And the vast reserves of Soviet gold—perhaps reaching the sum of \$8 billion and rising at an annual production rate of as much as \$600,000,000—provide formidable resources for economic warfare.

More

fe an M recurring infections? systemic reactions?



HARDLY EVER!

in urologic patients taking

This is why Mandelamine is a most effective urinary antibacterial, especially for stubborn disorders. Urine-specific Mandelamine eradicates most pathogens commonly encountered in chronic urinary infections - even strains resistant to antibiotics and sulfonamides. Mandelamine - antibacterial, but

not an antibiotic - does not produce resistant mutants. And systemic reactions are rarely seen.

Mandelamine ... effective, well-tolerated, economical. Average adult dose, 2 Mandelamine Hafgrams® q.i.d. MORRIS PLAINS. N.J



viet omnatd to a is

the Cala to who and

n of per ods, pron 15 es to opu-

oling ides.

unist ased

oviet sum

n an-

nuch

for-

omic

ore

We cannot match the challenge with modest projects. We must increase the grants or loans in economic aid to countries for whose political future we profess serious concern.

India accounts for some 40 per cent of the population of nations committed neither to American nor to Soviet policy. The loss of India to Communist rule is unthinkable without the loss, soon to follow, of all Southeast Asia. Yet American economic policy toward India has bordered on the frivolous. It has limited aid to a rate approximating \$50,000,000 a year.

Straight Thinking Needed

But any illusory economic crusade to "keep" Soviet policy "out" of the Middle East, of Africa, of the Far East can only spend itself to defeat—a defeat recklessly invited by attempting the impossible.

The task is as great as it is complex. It towers above the mean policy that barters economic aid for military concessions by other nations—or for their cheap and empty proclamations of anti-Communist zeal. America, far too long, has sought to convert the *economic* act into the *military* gain. The results are solemn scraps of paper.

Weapon of Diplomacy

Negotiation—its proper purpose and its prudent limitations—calls for understanding. Some advocates have tended to assign a moral value to negotiation; so the nation participating is credited with some virtue too, however obscure.

Suddenly the illusions validating the World War II alliance with the Soviet Union may insinuate themselves again. There may begin an attempt to stifle the truth of differences between Soviet and American policy. There may rise a hope that Soviet political life deserves a kind of tolerance if not sympathy.

There may stir, too, a senseless fear that peace might be endangered by honest acknowled 3ment of the inhumanity of Soviet dictatorship or the brutality of Soviet conquest.

Such confusion of morals and Continued on page 254 burn usua Pyrio nary meno

Pati

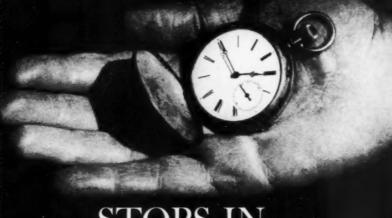
welc

table

gesic meno

250 MEDICAL ECONOMICS - MAY 23, 1960

urinary pain? frequency?



STOPS IN 30 MINUTES!

after the first dose of

PYRIDIUM°

brand of phenylazo-diamino-pyridine HCl

Patients on Pyridium experience welcome relief from urinary pain, burning, frequency and urgency—usually within 30 minutes. And Pyridium may be given with any urinary antibacterial. In fact, its recommended daily dosage of two 0.1-Gm. tablets t.i.d. provides a greater analgesic effect in adults than the recommended daily dosage of many fixed

antibacterial-analgesic combinations. Because Pyridium is extremely well tolerated, you can provide pain relief until the underlying infection is completely controlled with the antibac-

terial of your choice. So next time you see a patient with a painful urinary infection, prescribe Pyridium.



re

re i-

en-

3-

et

of

nd

54

announcing "Timovan" "Brand of Prothipendyl hydrochloride"

completely new calmative



for the temperamental older patient



for the emotional teen-ager



6024

252 MEDICAL ECONOMICS ' MAY 23, 1960

de

movan:

notably in geriatrics and adolescents

Specifically developed for active patients in need of calming without the "slow-down" of sedatives or the hazards of many tranquilizers. "TIMOVAN" offers a new range of safety and effectiveness in the relief of tension in the ambulatory patient, notably the adolescent and the geriatric. Particularly valuable in conditions in which excessive emotional response complicates therapy, as in dermatoses and allergies.14

- · Reduces excessive response to irritating stimuli.
- · Stabilizes the autonomic nervous system.
- · Nonhypnotic, yet improves sleep pattern.
- · No sensitivity reactions or toxicity reported.
- · Has not given rise to drug tolerance even on prolonged use.
- · Nonaddictive.
- · Preferred to barbiturates.

AYERST LABORATORIES New York 16, N. Y. . Montreal, Canada

DOSAGE: One or two tablets three or four times daily. Depending on age of patient and severity of symptoms, dosages ranging from 100 mg. to 400 mg. daily (in divided doses) have been used effectively and safely.

CONTRAINDICATIONS: Not to be used in cases of acute alcoholism or barbiturate poisoning.

SUPPLIED: "TIMOVAN" No. 739 -25 mg. tablets. No. 740 - 50 mg. tablets. Bottles of 100 and 1,000.

REFERENCES: 1. Medical Records of Chemiewerk Homburg A / G. 2. Linke, H.: München. med. Wchnschr. 100:969 (June 20) 1958. 3. Quandt, V.J., Von Horn, L., and Schliep, H.: Psychiat. et Neurol. 135:197 (Mar.) 1958. 4. Medical Records of Ayerst Laboratories.

MEDICAL ECONOMICS · MAY 23, 1960 253

politics gives warning as to the proper manner and the true matter of negotiation between American and Soviet policy.

What to Negotiate

They can negotiate practices, but not principles. They can negotiate what each proposes to do or demand, but not what each proposes to wish or think. The concern of politics is not with the truth of the belief—but the conduct of the believer.

History speaks plainly of all this. In Western Europe's conflict with Islam, peace did not come through a dialogue of philosophers reconciling alien creeds. Nor did either the Christian or the Moslem belief disappear in defeat, despite the ambition of each to be the faith of all the world.

And the division of the Christian world itself, with the religious wars of the seventeenth century, ended, too, by the processes of politics, not by some sudden devising of brotherhood. After the wars, the Catholic faith did not modify its profession to be the one true Christian faith.

Nor did the Protestant peoples surrender belief.

The instruction of the past finds confirmation already in the present.

In Poland, a Communist government and a Catholic Church endeavor to live together in peace.

In Israel, the division of world Jewry between orthodox and secular belief has extended to the new nation. The conflict of belief has made impossible even the writing of a basic instrument of government. Israel has no constitution. Yet the people live as a nation.

Disarmament Negotiations

The areas of necessary negotiation between East and West lie in the deadly sphere of armaments. Many factors urge Soviet policy to seek compromise in lightening the burden of arms upon itself and upon the world.

There is the cost of this burden to the Soviet economy: The cost of ever more complex electronic weapons keeps up its own headlong pace, so that each techno-

Continued on page 258

When patients phone for fast pain relief

...specify Bufferin, and curb salicylate intolerance

BUFFERIN effectively relieves pain and discomfort due to headache, colds and musclejoint strains, and gives temporary relief of minor arthritic pains. It is detectable in the plasma 60 seconds after taking I, absorption being expedited by its antacid components.²

BUFFERIN excels plain aspirin by avoiding gastric intolerance; it is "... the drug of choice where prolonged, high salicylate levels are indicated." 3

Gastric distress due to aspirin used alone has been reported consistently.4-10 BUFFERIN greatly reduces the incidence of side effects, "... is 4 to 5 times better tolerated than ordinary aspirin." 3

- 1 Harrisson, J. W. E.; Packman, E. W., and Abbott, D. D.: J. Am. Pharm. Assn. (Scient. Ed.) 48:50-56 (Jan.) 1959.
- 2 Paul, W. D.; Dryer, R. L., and Routh, J. L.: J. Am. Pharm. Assn. (Scient. Ed.) 39:21 (Jan.) 1950.
- 3 Tebrock, H. E.: Ind. Med. & Surg. 20:480-482, 1951.
- 4 Muir, A., and Cossar, I. A.: Brit. M. J. 2:7-12 (July 2) 1955.
- 5 Waterson, A. P.: Brit. M. J. 2:1531 (Dec. 24) 1955.
- 6 Brown, R. K., and Mitchell, N.: Gastroenterology 31:198-203 (Aug.) 1956.7 Kelly, J. J., Jr.: Am. J. Med. Sci.
- 232:119-128 (Aug.) 1956. 8 Brick, J. B.: J. Am. Med. Assn.
- 163:1217-1219 (Apr. 6) 1957.
 9 Trimble, G. X.: Correspondence, J. Am. Med. Assn. 164:323-324 (May 18)
- 10 Lange, H. F.: Gastroenterology 33: 770-777 and 778-788 (Nov.) 1957.

For a complimentary supply of BUFFERIN write: Bristol-Myers Company, Dept. BU-13, 630 Fifth Ave., N. Y. 20, N. Y.

MEDICAL ECONOMICS . MAY 23, 1960 255

eoples

past in the

t gov-

hurch er in

world

to the

n the ent of con-

ve as

ns

nego-

West

rma-

oviet

se in

s up-

irden

cost

ronic

lead-

hno-258

d.

When more than your personal assurance is required to relieve the emotional distress common to every illness,

EQUANIL may confidently be prescribed

EQUANIL is the most widely used ataractic agent; its efficacy and extreme safety in the control of tension, anxiety and muscle spasm are thoroughly documented in hundreds of published papers.

The action of EQUANIL is specific.

to relax mind and muscle.

Side-effects are rare.

Because it is rapidly metabolized, effects are not cumulative.

Because it does not cloud consciousness, your patients remain alert and cooperative.



Your request will bring you a descriptive brochure with extensive bibliography. Wyeth Laboratories Philadelphia 1, Pa.

A Century of Service to Medicine



sic ai to the practice of medicine

Banale, Meprobamate, Wiveth

logical advance taxes national resources more severely.

There is the steadily growing political-economic competition against the West: Rockets and satellites of the Soviet Army must be paid for in turbines and generators, loans and grants taken from Africa and Asia, and in minerals and machines and foods withheld from satellite nations.

There is the insurgent demand for consumer goods from peoples of all the Communist empire.

Finally, Marxist belief assures Soviet leaders that disarmament would upset the American economy. Precisely as Soviet policy gives credence to this belief, it must see disarmament as promising gain for itself.

These facts mean that Soviet policy stands under pressure of self-interest to protect its power, not by avoiding, but by achieving political agreement controlling armament.

What Blocks Agreement

Why have the forces of seeming self-interest not yet prevailed?

The question has two answers.

First, the problem of disarmament cannot be separated from the general problem of security in Europe—whose coming must be marked by some physical disengagement of military forces.

And second, so emphatic has been the American shunning of serious negotiation, through most of the 1950s, that Western proposals have been carefully confined to the safe realm of the unacceptable.

What kind of disengagement of armies is reasonable and negotiable? True and false have become confused and urgently demand reappraisal.

Our Armies

One: It is not true that the guarantor of another nation's liberties must be the presence of American armed forces. The hope lies with something quite different: the absence of Soviet divisions.

The forces of freedom have won some partial victories: There has been the rebellion of Yugoslavia against Soviet sovereignty. There has been the stout

Continued on page 262

sulins cult" diabetics Lilly

About 85 percent of all diabetic patients can be controlled with a single daily injection of Lente Iletin*. Many patients in the remaining group can obtain equally good control with a mixture of Lente and either Ultralente or Semilente Iletin.

The three Lente preparations can be mixed with one another in any ratio. Thus, they offer a wider range of Insulin activity than can be produced by any other type of Insulin.

The Lente Insulins reduce the risk of allergic reactions. They are crystalline pure—free of modifying proteins.

Supplied in U-40 and U-80 strengths at all pharmacies.

lletin® (Insulin, Lilly)

ELI LILLY AND COMPANY . INDIANAPOLIS 6, INDIANA, U.S.A.

926213

rma-

from urity must I dises.

most procone un-

ment d nee be-

y de-

t the slibce of The quite soviet

have

ries:

on of

over-

stout

262

Lifts depression..



as it calms anxiety!

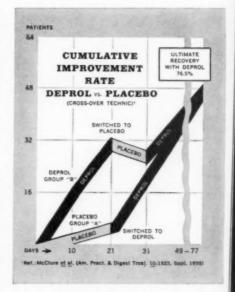
Smooth, balanced action lifts depression as it calms anxiety... rapidly and safely

Balances the mood-no "seesaw" effect of amphetamine-barbiturates and energizers. While amphetamines and energizers may stimulate the patient - they often aggravate anxiety and tension. And although amphetamine-barbiturate combinations may counbract excessive stimulation - theu often deepen depression.

In contrast to such "seesaw" effects, Deprol lifts depression as it calms anxiety - both at the same time.

Acts swiftly - the patient often feels better, sleeps better, within two or three days. Unlike the delayed action of most other antidepressant drugs, which may take two to six weeks to bring results, Deprol relieves the patient quickly -often within two or three days.

Acts safely - no danger of liver damage. Deprol does not produce liver damage, hypotension, psychotic reactions or changes in sexual function - frequently reported with other antidepressant drugs.



Dosage: Usual starting dose is 1 tablet q.i.d. When necessary, this may be grad-ually increased up to 3 tablets q.i.d.

Composition: 1 mg. 2-di-ethylaminoethyl benzilate hydrochloride (benactyzine HCl) and 400 mg. meprobamate.

Supplied: Bottles of 50 light-pink, scored tablets. Write for literature and samples.

'Deprol'

WALLACE LABORATORIES / New Brunswick, N. J.

resistance of Finland, naked though the nation has been to both military and economic threats by Moscow. There has been the defiance shown by Turkey and the successful political defense of Iran, both before NATO even existed. There has been the unique instance of a nation freed from Soviet armies—Austria, practicing an independence that political circumstances made tolerable to East and to West alike.

There is not one of these instances of freedom of defiance of Soviet policy that has been inspired or sustained by the physical presence of American soldiers.

This truth can be ignored only by an American diplomacy committed to belief in the military and to disdain for the political. And such a belief—aside from its impracticality—seems a strange credo for a nation assuring the world of its preference for peaceful settlement over military method.

Two: It is not true that a Soviet military withdrawal into the Soviet Union's own frontiers would be a deceptive concession, easy to reverse by a sudden whim to resume conquest. There would still operate, to enforce any such agreement, the Soviet reluctance to risk total war.

The American commitment to use atomic might to counter open Soviet aggression is the true military defense of the West today; it would not suddenly stop because the frontier of freedom had moved somewhat eastward. There would operate, too, the Soviet reluctance to abandon its world strategy of appeal through political and economic devices.

To Get, We Must Give

Three: It is true that encouragement of freedom and new hope in Eastern Europe remains the most unforgettable purpose of American diplomacy. The requisite is the retirement of the Soviet military; this indicates its own prerequisite: the retiring of the American military from its challenge of direct contact with Soviet forces. Since America has neither the power nor the intent to speed liberation by military

ession, whim would y such ctance

r open e miliday; it ecause had ward. o, the on its rough

new mains rpose he reof the tes its ng of

ices.

a has ntent litary 266

m its





1¼ Grs. Ea. FLAVORED

Living up to a family tradition

There are probably certain medications which are special favorites of yours, medications in which you have a particular confidence.

Physicians, through ever increasing recommendation, have long demonstrated their confidence in the uniformity, potency and purity of Bayer Aspirin, the world's first aspirin.

And like Bayer Aspirin, Bayer Aspirin for Children is quality controlled. No other maker submits aspirin to such thorough quality controls as does Bayer. This assures uniform excellence in both forms of Bayer Aspirin.

You can depend on Bayer Aspirin for Children for it has been conscientiously formulated to be the best tasting aspirin ever made and to live up to the Bayer family tradition of providing the finest aspirin the world has ever known.

Bayer Aspirin for Children - 114 grain flavored tablets - Supplied in bottles of 50.

 We welcome your requests for samples on Bayer Aspirin and Flavored Bayer Aspirin for Children. New GRIP-TIGHT CAP for Children's Greater Protection



THE THE PRINCIPLE INC. LAND BROADWAY, NEW YORK IS N. Y.

FOR THE EMOTIONAL "UPS"

AND "DOWNS"

STELAZINE

to relieve tension and nervousness...overcome apathy and emotional fatigue

'Stelazine' is outstanding among tranquilizers because it often shows a striking dual capacity: . . . it calms and relaxes tense, nervous patients . . . it motivates listless, apathetic patients toward a more normal level of mental and physical activity.

For this reason, 'Stelazine' is especially suitable for controlling the emotional "ups" and "downs" of your menopausal patients.

Just one 1 mg. 'Stelazine' tablet, b.i.d., usually protects your patient from emotional distress. Additional information available on request from Smith Kline & French Laboratories, Phila. 1.

Available: Tablets, 1 mg., in bottles of 50 and 500; and tablets, 2 mg., in bottles of 50.

SMITH KLINE & FRENCH

leaders in psychopharmaceutical research





why do doctors keep coming back to



...because of its versatile yet reliable action...as a gentle laxative or purgative... works within one hour when taken before meals—or overnight when taken at bedtime.

Patients like its predictable action without irritation or discomfort. Easy to take...with water, carbonated beverages, juices. Safe for all age groups ... used for over 60 years.

100 cc. contains: 48 Gm. sodium biphosphate and 18 Gm. sodium phosphate in bottles containing 21/2, 6, and 16 fl.oz.

Available at local pharmacies.



C. B. FLEET CO., INC. Lynchburg, Virginia 266 MEDICAL ECONOMICS • MAY 23, 1960

AMERICAN DIPLOMACY

action, it must operate with diplomatic action.

Four: It is true that compromises in military posture need be accompanied by concessions in demands for the unity of Germany. In the spring of 1959, American diplomacy finally surrendered the insistence on free elections. This brought German unity, for the first time, into the realm of the politically possible. The doubt remains whether either the West or the East, or even any great majority of the German people, so anxiously seek this unity as to make sufficient concessions.

This, then, is the *substance* of the issues before American diplomacy.

Time to Lead Allies

What comes of this hope will depend upon the manner and method of American diplomacy. The failures of the past give clues for the future. We—the only nation with whom Soviet policy could possibly negotiate serious issues—have been the nation of the West most insistent in proclaiming distrust of all negotiation.

More

comproneed be sions in of Gerf 1959, ally suron free German into the cossible, her eith-

ACY

can di-

German ek this nt con-

ope will er and omacy. we clues only napolicy serious

ition of in proegotia-

egotia-More



Patients are happier when doctors choose Fleet® Enema

They are free of the visceral discomfort and prolonged embarrassment so often caused by older enema methods. The ready-to-use Fleet Enema squeeze bottle also does away with troublesome preparation and cleanup procedures. Insertion is

You can order Fleet Enema with confidence for a variety of diagnostic and therapeutic purposes—even for patients

made easy and safe with the prelubricated, anatomically correct 2inch rectal tube. Most important— Fleet Enema provides a quick yet thorough cleansing action with only 4½ fl.oz. of precisely formulated, standardized solution.¹

on sodium-restricted regimens.2 Systemic absorption is negligible.

100 cc. contains: 16 Gm. sodium biphosphate and 6 Gm. sodium phosphate in 4½-fl.oz. squeeze bottle. Pediatric size, 2½ fl.oz. Also available: Fleet Oil Retention Enema, 4½-fl.oz. ready-to-use unit containing Mineral Oil U.S.P.



1. Rosenfield, H. H., et al.: Obst. & Gynec. 11:222, 1958. C. B. FLEET CO., INC. LYNCHBURG, VIRGINIA 2. Hellman, L. D.: To be published.

Now we must do more than participate in the serious diplomatic encounter with Soviet policy.

We must *lead* the West to that encounter.

And we must be ready with the political courage and wisdom to join that encounter—single and alone. American leadership within the Western alliance will assume new force—if it becomes unafraid of diplomatic dealing with the Soviet Union.

A Great Britain without effective power has urged the course of diplomacy. An America with the indispensable power has shied away. Thus even the English-speaking community within the West is divided against itself.

They Play on Our Weakness

The Soviet Union has been blind to none of these facts. It has enjoyed playing upon both British (or French) fear of conflict and American fear of negotiation.

It has been unawed by the American fascination with numerical advantage in mere quantity of nations—in coalitions, far-flung pacts, or at the conference table.

And it has known that America must pay the price of all coalitions in difficult diplomacy: the public wrangles, the labyrinthine debates, the confusion multiplied by the number of governments. They simply guarantee against any possibility of quiet deliberation, or secret decision—or, in fact, significant result.

Direct Talks Needed

And Soviet diplomacy long has sensed that serious negotiation between East and West will essentially bring together America and Russia in direct and discreet diplomatic encounter. On occasion, it has spoken this awareness bluntly and publicly.

Consider the informal words of the Soviet Premier, at the Kremlin's New Year's Day reception at the start of 1958, when he toasted the health of the President of the United States:

"I hope you other chiefs of mission will not misunderstand me, but we are realistic. If the Soviet Union and the United

Continued on page 272

Ancient Legend... the story of his search for perfection told in the pages of ancient Chinese manuscripts





TN'AO KUO-CHIU

apul and final figure in the

aim of Chinese "Immortals"

If you did not receive this senior

Modern Medical History... the story of METICORTEN as currently recorded in medical annals

XUM

nfer-

mercoathine plied ents.

gainst beraor, in

long gotiat will meril disc. On this

vords t the y rewhen

fs of stand f the nited

272

Pres-



the continuing "success story" of this corticosteroid is still being told in the pages of today's medical journals

METICORTEN® Drand of prednisone, 1,2,5 and 5 ms. tables.

170 papers referring to METICORTEN published in 1959

23:54, 1959. (11) Lemon, H. M.: Cancer 12:93, 1959. (12) Mclivenie, S. K., and MacCarthy, J. D.: Blood 14:80, 1959. (13) Methorner, H.: J. Louisiana M. S. 1959. (14) Newman, D. A.: New York J. Med. 59:625, 1959. (15) Perloff, W. H., and Channick, B. J.: Am. J. Obst. & Gynec. 77:138, 1959. (16) Reiss, F., and Pa Cannecticut Med. 23:22, 1959. (17) Resnick, N., and Sherrett, P. V.: A.M.A. Arch. Int. Med. 193-116, 1959. (18) Schneeberg, N. G., et al.: J. Clin. Endocrin. 1959. (19) Schreiner, B. F., and Greendyke, R. M.: Am. J. Med. 26:146, 1959. (20) Thomas, E. D.: Lochte, H. L., and Ferrebee, J. W.: Blood 14:1, 1959. (21) B et al.: Arth. & Rheumat. 2:82, 1959. (22) Ferris, B. G.: A.M.A. Arch. Indust. Health 19:146, 1959. (23) Garren, M. G.: M. Times 87:207, 1959. (24) Ney Levitzky, E.: J. M. Soc. New Jersey 58:62, 1959. (25) Macaulay, W. L.: A.M.A. Arch. Dermat. 79:202, 1959. (26) Ostrum, H. W., and Johns Treat 19:295, 1959. (27) Pagan-Carlo, I., and Haley, T. J.: Am. J. Roentgenol. 81:231, 1959. (20) Paley, S. S., et al.: Am. Nev. Tuborc. 78:307, 1959. (20) Sci. J. M. M. 186:682, 1959. (30) Allen, H. L.; McIcalf, D. W., and Giering, C.: Aesth. & Analg. 28:109, 1939. (31) Whichman, W., and Vaughan, J. H.; Pom. Int. Mer. 1959. (32) Partsey, W. Am. Heart, J. B. 75:301, 1959. (33) Frohman, I. P. - Am. J. Narsing 85:16, 1959. (34) Goldgraber, M. A.M. Arch, Int. Med. 480. (35) Griffin, A. O., and Bodian, M.: Am. J. Ophth. 47:544, 1959. (36) Narnagel, E. E.: A.M.A. J. Dis. Child. 97:426, 1959. (37) Hutter, R. V. P.: Concer 12:33 (38) Jameson, G. K.: Dis. Nerv. System 28:130, 1959. (39) Lerman, J., et al.: New England J. Med. 288:381, 1959. (40) Levin, S. J.: A.M.S. J. Bis. Child. 97:43 (41) Mandel, E. N.: A.M.A. Arch. Dermat. 79:352, 1959. (42) Prickman, L. E.: U.S. Armed Forçes M. J. 78:333, 1959. (43) Sagal, M. E.: J.A.M.A. 788-106. (44) Saryh, C. J.; Johnson, R. L., and Clark, G. M. Postgrad, Med. 28:315, 1959. (45) Alexander, M.: Arzit. Webnecht. 14:28, 1959. (46) Ballay, W. W. Steroot in Metabolic Diseases, paper presented at 75th Ann. Meet. Veterinary Med. Rasco. New Joseph Veterotton, April 8-9, 1959. (47) Bartword, L., Briffer, E., Lorson. let, J.: Compt. rend. Soc. de biol. 152:1528, 1959. (48) Tolksdorf, S.: Ann. New Yerk Acad. Sc. 82:829, 1959. (49) Boudin, G.; Barbizet, I., and Di and Cheek, W. Neurology B-271, 1959. (58) Kirsner, J. B., et al. -Am. Int. Med. 58-803, 1959. (59) Martin, D. B. Z. *** Pract. B. Digest Treat. 18-859, 1959. (59) Morg. R. F. Spc., R. Nose B. Trouble Month. 38-205, 1959. (61) Microbia. Pract. 18-859, 1959. (62) Microbia. Pract. 18-859, 1959. (62) Microbia. Pract. 18-859, 1959. (63) Horman, D. A. J. Floricis N. K. 48-778, 1959. (68) Pastersak, R. K. S. Saspit. Chees. 19-593, 395. (68) Horman, D. A. J. Floricis N. K. 48-778, 1959. (67) Pastersak, R. K. S. Saspit. Chees. 19-593, 395. (68) Pastersak, R. K. S. Saspit. Chees. 19-593, 395. (68) Pastersak, R. S. Saspit. Chees. 19-593, 395. (68) Pastersak, R. S. Saspit. Chees. 19-593, 395. (68) Pastersak, R. S. Saspit. Chees. 19-593, 395. (69) Pastersak, R. S. Saspit. Chees. 19-593, 395. (69) Pastersak, R. S. Saspit. Pastersak, R. burg, H.: Eye, Ear, Nose & Throat Month. 38:295, 1959. (61) Miller, J. L.: A.M.A. Arch. Dermet. 79:615, 1959. (62) Miller P. E.; Herwith, M.; Pennington, T. G., and Clarkson, B.; Metabolism 9:709, 1959. (134) Worbin, S. Z.; Am. J. Carticis, 8:256, 1959. (135) Baier, M.; Klin, W. 37:1127, 1959. (130) Bercevitz, T. T., Dis. Color B. Recham 2:418, 1959. (137) Blackman, J.; Castilli, S. T.; Lind, P. R., and Spariman, D.; Rabicity 7:159. (136) Estates, J. L.; Bander, J. L.;

Prompt-Long-lasting~Economical

QUADRINAL

• bronchodilator and expectorant

QUADRINAL

· bronchial asthma

QUADRINAL

· pulmonary emphysema

QUADRINAL

 other chronic respiratory disease with bronchospasm and wheezing

FORMULA:



DOSAGE: The usual dose of **QUADRINAL** is 1 tablet every three or four hours during the day and, if needed, another tablet upon retiring for relief during the night.

For children, 1/2 tablet three times a day.

. 5 grs. (0.3 Gm.)

Now available - a good tasting

QUADRINAL Suspension

(each teaspoonful = 1/2 tablet)

QUADRINAL is available on prescription only.

QUADRINAL febluts (7-1/4 grs. each)
bettles of 100, 500, and 1000.
Quadrinal, Phyllicin®, E. Bilhuber, Inc.

KNOLL PHARMACEUTICAL COMPANY
(formerly Bilhuber-Knoll Corp.)
Orange, New Jersey

MEDICAL ECONOMICS · MAY 23, 1960 269

1959. (4) Drod 9. (7) Gordon, a 1., et al.: Pea tiana M. Soc. F., and Pality (

59. (21) Bunit 4) Heyman, Am. Pract. & D. (20) Schola n. Int. Med. 1 ed. 103:354, ncer 12:330, thid. 97:432

Wa Steroid
L. C.; Loras,
Dulloz, J.-C.;
L. J. 62:546
L. S., and Car
(57) Kession

1959, (60)

mar, H. O.

L, and Ca

intol. 2:66 in. North 100) Papage

41a:22

and Berief. c. 29:308 1

06) Miller C 2, pp. 18-1 12:950 1

19) Burda & Surg. this per, B. F.; this J. Org. th

9. (131) 9. (133)

Klin. W y 73:50 1 G.: Am. I. 0 59. (142

V. F.: Into med. I

157) Stage Med. 2011 et al.: IAF teimor, IL

antz, A 6, 1 59.

CG.: Am. (71) Thomas Lim, W. Lecomto B4:1245 Graham

How Dial can help curb the in hospitals

The antibacterial ingredient in Dial—a synergistic combination of hexachlorophene and trichlorocarbanilide—has long been known for its effectiveness against the skin bacteria that cause perspiration odor.

Now new and more extensive tests have established that Dial inhibits the growth of a wider range of gram-positive and gram-negative bacteria than any other leading toilet soap—including strains that are resistant to antibiotics.

Many physicians already recommend the use of Dial to their patients. Now this new evidence points up even more sharply the benefits of Dial for hospitalized patients and hospital personnel.

Dial is available in guest sizes for hospitals. Ask your hospital purchasing agent to write our laboratory at the address below for information and free samples.



FROM THE SOAP DIVISION OF ARMOUR

al Soap staph problem



In vitro tests demonstrate Dial's extraordinary effectiveness

1. Ordinary toilet soap left this heavy growth of Staphylococcus aureus



2. A widely used antiseptic soap showed little inhibition of Staphylococcus aureus



3. Dial Soap completely inhibited Staphylococcus aureus

AND COMPANY · 1355 W. 31st Street, Chicago 9, Illinois

MEDICAL ECONOMICS - MAY 23, 1960 271

OUR

e

ls

ation

nown pira-

Dial ramding

their

7 the

nnel.

pital elow

States can get together and can reach an agreement, most of the world's problems will be solved."

More often, such Soviet beliefs have been spoken privately in diplomatic circles of many a world capital. To the chiding of an American ambassador in one West European capital after the failure of London disarmament conversations in 1955, the Soviet Ambassador replied:

"We need not fool one another. When you are serious about disarmament, you will not be making speeches in a room full of nations. You and we will quietly talk."

It Must Come

Here emerges the most serious test of American diplomacy: awareness of the diplomatic encounter which it must one day attend. Short of World War III, some such encounter-indeed, series of encounters-is inevitable. Debate on its desirability seems almost academic.

We must envision bilateral negotiation with the Soviet Union. For without testing this, America cannot call upon the peoples of the world to abandon all hope.

The question for American policy to answer, then, is not whether the coming of bilateral negotiation can be tolerated. It will come. The question is whether American diplomacy will be prepared for it.

'Daily' Diplomacy

Here are wise ways to proceed: Use the devices of daily diplomacy long left in disuse: the quiet conversation, the personal conference, the ambassador with increased authority to explore the edges of areas of common consent.

Such a diplomacy would look toward negotiation, not with fretful anxiety, but with assurance and poise. And, after a while, it would begin to invite the kind of discussion it once shunned, issuing-instead of receiving-the challenge to diplomatic discourse.

All the while, such a diplomacy would never forget that its ultimate commission, by the history of our age, is not merely to serve America but to save the civilization that belongs to many. **END**

against pain

Zactirin

Provides potent analgesic and anti-inflammatory benefits without sedation, risk of addiction, tolerance or constipation.



Supplied: Tablets, bottles of 48.

Wyeth Laboratories Philadelphia 1, Pa.

A Century of Service to Medicine

Could You Resist This Stock Salesman's Pitch?

Continued from page 79

ation out on tomorrow's date, which would be the first.

JEFFERS: Let me look at this literature, and I'll discuss it at home and let you know.

SALESMAN: I'll enclose my business card. I'll mail the literature immediately. And let's try to get together sometime soon. I'd like to meet you personally.

JEFFERS: Yes, indeed. And thank you very much.

SALESMAN: Thank you. And just remember, if you don't make any money, I don't make any money. Judge me on the outcome of this situation! That's all I ask. What would I gain by giving you anything that isn't going to do the right job for you?

So this is all that I want you to do: I want you to hold just 100 shares of Columbia. It opened at 5¾ today. Now, I'm giving you the stock at five-and-a-half bucks. I've got 300 shares on my

desk. I'll give you 100 at fiveand-a-half bucks, and judge me by the outcome of this situation. Is that fair?...

* * *

Whew! Take a moment's breather and then consider whether you'd have been sufficiently swayed by the salesman's eloquence to place an order for Columbia Credit. Let's hope not. If you'd done so, you would have violated every one of these "New Year's Resolutions for Investors" issued last December by the American Stock Exchange:

- 1. Know your dealer.
- 2. Think before buying.
- 3. Beware of telephone pitchmen.
- Guard against high-pressure sales.
- Beware of get-rich-quick promises.
- Investigate before you invest.

As for myself—did I invest? I'm happy to report that I didn't. It's now a couple of months since the salesman called me. And Columbia Credit has moved. It has dropped a quarter of a point.

Why Clinical Judgment Often Dictates Altafur for Peroral, Systemic Therapy of Pyodermas

Gratifying Therapeutic Response

rene

n.

it's

ler

fi-

n's

for

ot.

ive

ew

st-

he

ch-

es-

ick

in-

st?

n't.

ths ne.

ed.

a

ND

ALTAFUR was found "highly satisfactory in most of the primary and secondary bacterial dermatoses treated to date," including "pyodermas... caused by antibiotic resistant strains of staphylococci." In a nationwide survey? there were 94% satisfactory results (cured or improved) among 159 patients treated with ALTAFUR for pyodermas.

Virtually Uniform in vitro Susceptibility of Staphylococcus aureus

99.5% of isolates (214 of 215) from patients with staphylococcal infections—including many antibiotic-resistant strains—proved sensitive in vitro to Altafur in tests conducted across the nation.³ 99.7% of staphylococcal isolates (334 of 335) at a large general hospital—including many antibiotic-resistant strains—proved sensitive in vitro to Altafur.⁴

Wide, Stable Antimicrobial Spectrum

"Because of its relationship to previously developed nitrofurans, it is anticipated that [ALTAFUR] will retain its original spectrum after longstanding clinical usage." Development of significant bacterial resistance to Altafur has not been encountered to date.

Minimal Side Effects

Side effects are easily avoided or minimized by these simple precautions:

1) alcohol should not be ingested in any form, medicinal or beverage, during Altafur therapy and for one week thereafter 2) each dose should be taken with or just after meals, and with food or milk at bedtime (to reduce the likelihood of occasional nausea and emesis).

1. Weiner, A. L.: Paper presented at the Conference on Recent Advances in the Treatment of Chronic Dermatoses, University of Cincinnati (Ohio), Nov. 5, 1959. 2. Compiled by the Medical Department, Eaton Laboratories, from case histories received. 3. Christenson, P. J., and Tracy, C. H.: Current Therapeutic Research 2:22, 1960. 4. Glas, W. W., and Britt, E. M.: Proceedings of the Detroit Symposium on Antibacterial Therapy, Michigan and Wayne County Academies of General Practice, Detroit, Sept. 1, 1959, p. 14. 5. Leming, B. H., Jr.: Ibid., p. 22. 6. Investigators' reports to the Medical Department, Eaton Laboratories.

Tablets of 250 mg. (adult) and 50 mg. (pediatric) bottles of 20 and 100 Altafur

EATON LABORATORIES, NORWICE, NEW YORK

now-for more comprehensive control of



vical gaine with spaan of cervical season of the strains of the st

or re of

-<u>pain</u> due to or associated with -<u>spasm</u> of skeletal muscle

a new muscle relaxant-analgesic

Robaxisal

Many conditions, painful in themselves, often give rise to spasm of skeletal muscles. ROBAXISAL, the new dual-acting muscle relaxant-analgesic, treats both the pain and the spasm with marked success: In clinical studies on 311 patients, 12 investigators' reported satisfactory results in 86.5%. Each ROBAXISAL Tablet contains:

- An analgesic component—aspirin—whose pain-relieving effect is markedly enhanced by Roberin, and which has added value as an anti-inflammatory and anti-rheumatic agent.... (5 gr.) 325 mg.

BIDICATIONS: Renazura, is indicated when analysis; as well as referent action in desired in the treatment of deletal mode speam and the management pain. Typical conditions are diseased the background pain. Typical conditions are diseased by whipfunk and other tranmattic injuries, myusicis, and pain and speam acceptant with strictis.

SUPPLY: Repaired Thiles (pick and white, inniested) in bettles of 100 and 500.

Also evailable: Remarks Injectable, 1.0 Cm. in 10-cc. ampul. Romarks Thileta, 0.5 Cm. (white, scared) in hordes of 50 and 500.

Chercal course in the of A. H. Raban Co., Irc., Span: J. Allen, Madhan, Wisc. B. Sillow, May York, N. Y. B. Durber, Richard Vo., S. Steman, Sc., Assoc, Co., E. B. Gorden, New York, N. Y., J. B. Helmiddel, Schausende, M. Y., L. Leye, New York, N. Y., N. Linker, S. S. Sillow, S. S

Robins

A. H. ROBINS CO., INC., Richmond 20, Virginia,

Planny troug's monicions with integrity . . . swiling summrow's with perciatered

in very special cases a very superior brandy.. specify

HENNESSY

84 PROOF Schieffelin & Co., New York



EXCLUSIVE...



A sensible time payment plan for buying professional equipment. It features low down payment and reasonable service charges.

Increase your income... with modern equipment.
Buy now!

Contact Your RITTER Dealer for Complete Details.

RittercREDIT

CORPORATION ROCHESTER 3, N. Y.

A subsidiary of Ritter Co., Inc.

Behind the Tangled Web of Specialism: Specialty Boards

Continued from page 86

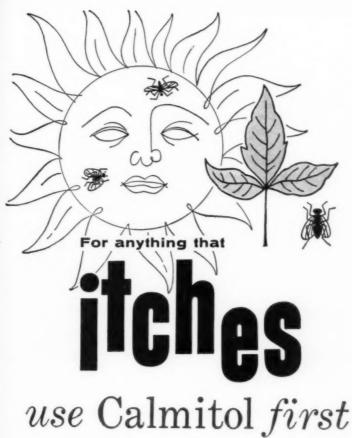
then decided to drop the plan.

"Since we were the first board formed," a spokesman commented candidly, "we felt perhaps we ought to set an example in democracy. But we've probably set ophthalmology back by at least twenty years."

Thus was one set of arbitrary requirements averted. But many others remain. Among those cited most frequently by the surveyed specialists:

Reference requirements. Before certifying a candidate, some boards require favorable references from certified men in the community. This makes it possible for any diplomate to blackbail a local competitor. "I know personally of two men who were denied certification just because someone had a grudge against them," says a Georgia obstetrician.

Rejection rules. According to one board's by-laws, "The Board,



... for every type of pruritus, CALMITOL® is the fast acting conservative, low-cost, nonsensitizing antipruritic. Supplied: tubes, 11/2 oz., and 1-lb. jars of nonirritant, easy-spreading ointment. For severe itching, Calmitol Liquid, 2-oz. bottles.

Thos. Leeming & Co. Inc. 155 East 44th Street, New York 17.

MEDICAL ECONOMICS ' MAY 23, 1960 279

d

in. rd merole bby

ary ny ose ur-

Beme erthe

osckow ere

use

nst

tri-

to rd,

SPECIALISM: THE BOARDS

acting as a committee of the whole, reserves the right to reject an applicant for any reason deemed advisable and without stating the same. And the action of the Board shall be final." Similar clauses give board members the power to revoke a diplomate's certificate without a hearing. As an Illinois ENT man puts it, this means that practicing specialists "have no recourse from their board's decision and no explanation given when they fail to qualify. This is grossly unfair."

Examination requirements.

Some boards pass almost everybody. Others have been known to flunk 40 or 50 per cent. The surveyed specialists seem firmly convinced that at least one board flunks far too many applicants in order to hold down the number of certified specialists in that field.

Are examinations really necessary now? A good many specialists apparently think not. Says a California anesthesiologist: "I think American board examinations should be abol-

Continued on page 287

NAUSEA AND VOMITING?

Make your first thought EMETROL... because of all widely prescribed antiemetics only EMETROL acts promptly and physiologically to control most cases of nonorganic vomiting... without the hazard of masking organic etiology or provoking side effects. Especially useful in the "g.i. virus" season... always a wise first choice for children and pregnant women.

EXECUTION PHOSPHORATED CARBONYDRATE SOLUTION Dosage: 1 or 2 teaspoonfuls for children,

1 or 2 tablespoonfuls for adults, repeated at 15-minute intervals as required. DO NOT DILUTE or permit fluids immediately

before or after each dose.

Columbus, Indiana

New Dianabol converts protein to working weight in wasting or debilitated patients

Mrs. M. R., 75-year-old underweight patient:



Puts on 131/4 needed pounds in just 6 weeks:



gains 1" on right biceps;



forces mercury column 14 mm. higher in cuff-compression test of muscle strength;



feels better than she has in 2 years.

Dianabol is a new tissue-building agent with distinct advantages over previous compounds of this type.

By aiding the deposition, synthesis, and utilization of protein, Dianabol affords these benefits in the underweight elderly patients with or without serious disease and in patients who are chronically ill or convalescent:

- Rebuilds tissue and improves appetite, thus promoting lean weight gain.
- · Restores tone to weak, flabby musculature.
- Speeds healing of wounds; hastens postoperative recovery and convalescence from a variety of diseases.
- Strengthens skeletal structure; often relieves pain and increases mobility in osteoporosis.
- Improves general physical status; helps to revive a sense of well-being.

Economical, convenient to administer, and almost without virilizing effects, Dianabol overcomes the disadvantages that have restricted use of tissue-building compounds in the past. Older patients, whose funds are often limited, will particularly welcome the low cost of Dianabol therapy.

Complete information available on request. SUPPLIED: Tablets, 5 mg. (pink, scored); bottles of 100.

Photos used with permission of the patient.



Dianabol[®]

New, orally effective tissue builder

Converts protein to working weight in wasting or debilitated patients

C I B A

8/270816

ry-

wn The

nly

ard

in

hat

ec-

pe-

ot.

lo-

ard

ol-

87

G?

use

ses

cts.

Iways

men.

- (R)

ana

L acts

PENICILLIN, YOUR FIRST ANTIBIOTIC, NOW SYNTHESIZED FOR IMPROVED ORAL THERAPY

THE NEW, SYNTHESIZED PENICILLIN

from Schering

CIC, OR PY

THIS IS THE TABLET

M-275

ALPEN is the oral penicillin that provides, on a fasting stomach, peak antibiotic blood levels approximately twice as high as oral potassium penicillin V... and significantly higher than I. M. penicillin G.

Some strains of staphylococci resistant to other penicillins exhibit in vitro sensitivity to potassium phenethicillin.

ALPEN has greater freedom from the G. I. sequelae (overgrowth of resistant flora) sometimes observed with broad spectrum-mycins.

ALPEN gives much higher antibiotic levels within the first hour of ingestion by the well-tolerated oral route.

WHEN TO USE ALPEN Recommended in the treatment of infections caused by pneumococci, streptococci, gonococci, corynebacteria, and penicillinsensitive staphylococci.

HOW TO USE ALPEN Depending on the severity of the infection, 125 mg. (200,000 units) or 250 mg. (400,000 units) three times daily may be used. In more severe or stubborn infections, a dosage of 500 mg. (800,000 units) t.i.d. may be employed. In beta hemolytic streptococcal infections, treatment should be continued for at least ten days.

PRECAUTIONS The usual precautions in the administration of oral penicillin should be observed. For further details see package literature. Tablets: 125 mg. and 250 mg., bottles of 25 and 100. Powder for Oral Solution (lemon-lime flavored), 1.5 Gm. bottle (125 mg. per 5 cc. teaspoonful).

this is the tablet that gives higher peak antibiotic blood levels

HIGHER THAN I. M. PENICILLIN G HIGHER THAN POTASSIUM PENICILLIN V

ALPEN

Schering

relieves the persistent pain of arthritis



DARVON® COMPOUND

(dextro propoxyphene and acetylsalicylic acid compound, Lilly

Darvon Compound combines the analgesic action of Darvon® with the anti-inflammatory and antipyretic benefits of A.S.A.® Compound. When inflammation is present, Darvon Compound reduces discomfort to a greater extent than does either analgesic given alone.

Usual dosage: 1 or 2 Pulvules® three or four times daily. Also available: Darvon, in Pulvules of 32 and 65 mg.

Darvon® (dextro propoxyphene hydrochloride, Lilly)

A.S.A.® Compound (acetylsalicylic acid and acetophenetidin compound, Lilly)

ELI LILLY AND COMPANY . INDIANAPOLIS 6, INDIANA, U.S.A.

020220

ished. If an approved residency program is satisfactorily completed, I think the examination is redundant."

"It's unreasonable to expect that a three-day examination can adequately evaluate twelve years of work," adds a Missouri internist.

And a number of specialists seem to agree with the South Carolina pathologist who feels that "certification should be made by the training institutions and those locally responsible for the program. No national exami-

nation of the candidates should be necessary."

The prevailing attitude of the surveyed doctors seems to be that the specialty boards, while made up of humans, have a tendency to wield divine powers. They concede that today's more stringent training requirements are a good thing. They're glad their board examinations are behind them, and they're proud of the certificates on their walls. But something needs to be done, they say, about the American board system's basic flaw—the

Some men won't



Jo :

Doctor-

FREE
2-Speed ECG Rule
and Booklet \$1 Value

settle for less

The man who buys carefully, who looks at every detail, usually owns the finest. When you examine the new Birtcher 300-R, you will discover the accuracy and quality which mark this as the Electrocardiograph for the Physician who won't settle for less than the finest.

B

THE
BIRTCHER CORPORATION
Department ME-560B
4371 Valley Blvd.,
Los Angeles 32, Calif.

Please send me, without obligation, an ECG Rule and 2-Speed Cardiography Booklet plus descriptives on the 300-R

Address

City _____Zone __ State __

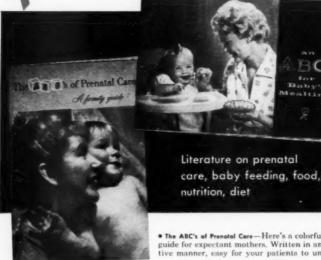
MEDICAL ECONOMICS : MAY 23, 1960 287

he

nd.

ort

from Heinz for your patients



OVER 100 KINDS

HEINZ Baby Foods

• The ABC's of Prenatal Care - Here's a colorful, 40-page guide for expectant mothers. Written in an informative manner, easy for your patients to understand.

• An ABC's for Boby's Mealtime - How to feed the new baby. This 24-page feeding booklet guides new mothers. Edited by a pediatrician.

• Facts About Foods-This 20-page nutritional guide shows analyses of over 200 foods, Also recommends dietary allowances.

• Guide to Better Nutrition-Simple, 6-page pamphlet dietary guide. For men, women, infants.

• Diet Recommendation Pads - Names all Heinz Baby Foods and ingredients. Doctors check boxes

to save valuable time.

• Special Diet Pads - List wheat, egg, milk and citrusfree varieties for restricted diets. 25 sheets per pad.

· Please write to Heinz Baby Foods, Box 57, Pittsburgh 30, Pa. for literature, indicating quantities desired.



SPECIALISM: THE BOARDS

flaw that explains all flaws cited previously:

3. The boards are accountable to no one.

A medical school dean has described this situation better than anyone else. Each of the nineteen specialty boards, he says, is "self-centered." Each board can indirectly "impose upon the hospitals" the specialty training program to be followed. Each board can autonomously impose upon specialists the rules they must follow in practice. Some new "moderating body" must be given control over all the boards, says this dean, if we want to rid specialism of the "jurisdictional fights in hospitals that reflect the attitudes of labor unions."

"Amen!" say the surveyed specialists. A California anesthesiologist calls for "an outside, impartial agency empowered to review the activities of the boards." A thoracic surgeon in Iowa wants such an agency to have some say in board membership. A Montana obstetrician wants it to bring board requirements into some semblance of uniformity.

"Amen!" say the surveyed specialists. A California anestroider.

Helps you

take the misery out of menopause

as hormones alone often don't do

Milprem calms anxiety and tension; controls moody ups and downs; relieves insomnia and headache. Checks hot flushes by replacing lost estrogens. The patient feels better than she did on estrogen therapy alone.

Supplied: Milprem-400, each coated pink tablet contains 400 mg. Miltown (meprobamate) and 0.4 mg. conjugated estrogens (equine). Milprem-200, each coated old-rose tablet contains 200 mg. Miltown and 0.4 mg. conjugated estrogens (equine). Both potencies in bottles of 60.

Milprem

WALLACE LABORATORIES
New Brunswick, N. J.



0-page formarstand. he new

guide

Baby

citruser pad. sburgh lesired,

SPECIALISM: THE BOARDS

The essentials for such a control board may now exist in the Advisory Board for Medical Specialties. Represented on this board are the nineteen specialty boards, the Association of American Medical Colleges, the American Hospital Association, the Federation of State Medical Boards, the National Board of Medical Examiners, and the American Medical Association. At present, the Advisory Board can't initiate changes or compel

the individual boards to do anything about their requirements. But maybe it would help if the Board were given such powers, many of the surveyed specialists suggest.

Of course, the boards have their own ideas about how to untangle specialism's web. These will be the basis of a subsequent article in this series. Meanwhile, one thing is plain—and more than one specialist has said it: "We can't go on like this!" END



"I understand the hospital is on a rather limited budget."

nynts. the ers, ists ave unese ent iile, ore

it:



IN THE TREATMENT OF PSORIASIS



Clinically tested, safe and effective RIASOL offers maximum assurance against recurrence and adverse reactions.

RIASOL contains 0.45% Mercury chemically combined with soaps, 0.5% Phenol, and 0.75% Cresol. Available at pharmacies or direct in 4 and 8 fluid ounces. Write for professional sample and literature.



12850 MANSFIELD

DETROIT 27, MICHIGAN
MEDICAL ECONOMICS - MAY 23, 1960 291

highly effective

in allergic and inflammatory

unsurpassed for total corticosteroid benefits

Substantiated by published reports of leading clinicians

• effective control of inflammatory and (4,7,5,00,0) allergic symptoms



 biochemical and psychic balance disturbance minimal^{1,4-18} tivevell-tolerated control

atory in disorders including psoriasis

Triameinolone LEDERLE

A Promise Fulfilled - All corticosteroids provide symptomatic control in rheumatoid arthritis, bronchial asthma and inflammatory dermatoses. They differ in the frequency and severity of side effects. Introduced in 1958, Aristocort Triamcinolone bore the promise of high efficacy and relative safety.

Physicians today recognize that the promise has been fulfilled . . . as evidenced by the high rate of refilled Aristocort prescriptions.



List of References 1-18 supplied on request.

Precautions: With ARISTOCORT all precautions traditional to corticosteroid therapy should be observed. Dosage should always be carefully adjusted to the smallest amount which will suppress symptoms.

Supplied:

- 1 mg. scored tablets (yellow)
- 2 mg. scored tablets (pink)
- 4 mg. scored tablets (white)
- 16 mg. scored tablets (white)

LEDERLE LABORATORIES, A Division of AMERICAN CYANAMID COMPANY, Pearl River, N.Y.

chie

Know Where You Stand Before You Sterilize

Continued from page 94

"All that sounds like a wise precaution," said Dr. Middleton's attorney-brother. "But I don't think we should mislead the doctors on the malpractice danger. Actually, very few malpractice suits are based on the results of sterilizing operations—unless the sterilization was an unintended accident."

Replied Attorney Ranier: "But if the patient sues, the doctor's likely to be on his own. That's because a malpractice insurance carrier may refuse to protect a doctor who's being sued for damage allegedly resulting from sterilization."

"How could the insurance company possibly refuse?"

"It could argue that sterilization is against public policy and that therefore a contract to protect it is illegal."

Dr. Carpenter spoke up: "One of you lawyers said something a

moment ago about accidental sterilization. What's the score there?"

"If a doctor accidentally sterilizes a patient as a result of X-ray or surgery, there may well be claims for damage because of loss of procreative powers," replied the hospital counsel.

Dr. Middleton, who'd been listening intently and taking notes, spoke slowly and deliberately. "I'm grateful for today's conference, gentlemen," he said. "But I still resent the idea of legal restrictions on my judgment regarding a patient. I say that a sterilization is sometimes a matter to be decided by doctors—not by judges, juries, or legislators."

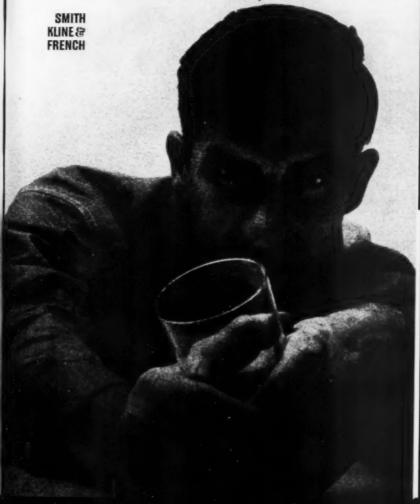
Fight It?

Turning to his urologist-colleague, he added: "Fred, I think we ought to get together and carry the torch for our rights as physicians."

"I sympathize with you," said the hospital legal man. "But remember, he who carries the torch is often he who gets burned."

in chronic alcoholics • Compazine® brand of prochlorperazine

reduces the urge to drink-by controlling the anxieties and frustrations from which patients seek escape in alcohol. On 'Compazine', patients become more amenable to counselling, and therapy may be continued with remarkable safety . . . for months, if necessary.



ntal ore

eriray be

of re-

een ing eray's aid. of

dgsay nes locor

colink and sas

aid rethe gets END

new nitrate offers new benefits for anginal patients

Fremont¹ notes that ISORDIL "... has been very effective in increasing the exercise tolerance of patients and also reducing the number of attacks of angina pectoris of the decubital type." Prophylactically and therapeutically, ISORDIL provides four distinctive advantages.

rapid onset —ready solubility of ISORDIL produces benefits within 15 to 30 minutes (not intended to replace emergency use of nitroglycerin).

prolonged action—benefits of ISORDIL persist for at least 4 hours per oral dose 10 mg.

consistent effect—85 per cent of patients² treated have responded favorably to ISORDIL. In comparative studies, Sherber³ found ISORDIL better than other therapy in 17 of 18 patients.

unusual safety—only reported side reaction: transitory, easily-controlled headache.

Electrocardiographic studies by Russek⁴ clearly show that ISORDIL produces a more favorable balance between oxygen supply and demand following the Master two-step test. He concludes that "ISORDIL is a new and effective agent for therapy of angina pectoris."

Literature & professional samples available on request.

1. Fremont, R.E.: Personal Communication (Dec., 1959). 2. Summary of Case Reports on File, Ives-Cameron Company. 3. Sherber, D.A.: Personal Communication (Oct., 1959). 4. Russek, H.I.: Personal Communication (Oct., 1959).

TABLETS

Isordil

Isosorbide Dinitrate, Ives-Cameron



IVES-CAMERON COMPANY New York 16, New York

*Trademark



Index of Advertisers

Page number in parenthesis refers to product listings in Physician's Desk Reference or supplement published by MEDICAL ECONOMICS, INC.

	Abbott Laboratories Oretic (PDR 609)	Eato
	Adolph's, Ltd.	Fu
	Salt Substitute	Endo
	A-O Hb Meter	Epsc
	American Sterilizer Company Amsco Double Cabinet Sterilizer 101	Ho
	Ames Company, Inc. Clinitest (PDR 616)	Fleet
	Armour & Co.	Fle
	Dial Soap	
	Beminal Forte (PDR 625)	Geba
zi	Timovan	Eth Geign
2		But
200	Bauer & Black, Div. of the	101
*		Hein:
and he	Elastic Stockings	Lite
1	Arc-Vue Otoscope May Ophthalmoscope	
8	Bayer Company, The Bayer Aspirin for Children	Irwin
	Becton, Dickinson & Co.	Ives-
	B-D Yale Sterile Disposable Needles 25	Ison
	Birtcher Corp., The Electrocardiograph	
9	Blonder-Tongue Laboratories, Inc. FM Radio	Kinn
	Breon & Co., Geo. A.	Em
	Lanesta Gel (PDR 638)	Knoll
۰	Azotrey (PDR 642) 937	Qua
	Naldecon (PDR 643)30, 31 Bristol-Myers Co.	
	Bufferin	Lamb
		Leder
	Chicago Pharmacal Company	Aris
	Urised (PDR 652)	Leem
	Apresoline (PDR 653)	Calı
	Dianahol 981	Lilly
	Dianabol	Dar
		Erg
	Serpasil-Apresoline (PDR 658)163	Bec
	Serpasil-Apresoline (PDR 658)	llos
	Cooper, Tinsley Laboratories	Len
	Phantos & Phantos-10 (PDR 662)164	Seco
	David Pubber Company	M-N-
	Usher's Marlex Mesh	McNe
	Drew Pharmacal Company	Grif
	Zilatone Tablets	Tyle

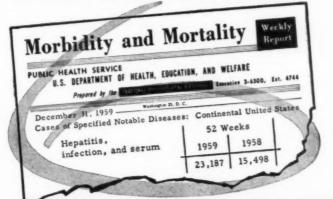
Eaton Laboratories Altafur (PDR 670) 275 Altafur (PDR 670) 63 Turadantin (PDR 671) 63 Tricofuron Improved (PDR 672) 14 Endo Laboratories	
Coumadin Sodium (PDR 673)169	
Hon Fetal Monitor	
Fleet Co., Inc., C. B., Fleet Enema (PDR 674)	
Gebauer Chemical Company, The Ethyl Chloride	
Tofranil (PDR 677) 57	
Heinz Company, H. J., Literature on Prenatal Care, Baby Feeding	
Irwin, Neisler & Co. Analexin (Apr. Suppl.)	
Kinney & Company Chel-Iron Plus (PDR 688) 6 Emetrol (PDR 689) 280 Knoll Pharmaceutical Company Quadrinal (PDR 690) Quadrinal Suspension (Apr. Suppl.) 269	
Lambert Pharmacal Company Listerine	
Lederle Laboratories Aristocort (PDR 694) 292, 293 Gevral (PDR 697) 214, 215 Leeming & Co., Inc., Thos., 279 Calmitol (PDR 704) 279	
Calmitol (PDR 704)	
Lilly & Company, Eli Darvon Compound (PDR 708) . 286 Ergotrate Maleate (PDR 710) . 136 Becotin with Vitamine C (PDR 795) 107 llosone (PDR 712) . 108, 109 Lente Iletin (PDR 711) . 259 Seconal Sodium (PDR 715) . 68 Trinsicon (PDR 716) . 23	
McNeil Laboratories, Inc. 129 Butiserpine (PDR 727) 129 Grifulvin (PDR 728) 99 Tylenol (PDR 729 40	

INDEX OF ADVERTISERS

Maitble Laboratories	Schering Corporation
Dornwal	Alpen
Mead Johnson & Company Lactum (PDR 730) 234, 235 Natalins Comprehensive Tablets (PDR 731) 10	Alpen
Lactum (PDR 730)234, 235	Demazin (PDR 806)
Natalins Comprehensive Tablets	Deronil (PDR 806)
(PDR 731) 10	Meticorten
	(PDR 806) Insert between 268, 269
Derma Medicone	Polanil 11 Rela (Apr. Suppl.) 138, 138 Sigmagen (PDR 807) 218
Rectal Medicone	Rela (Apr. Suppl.) 138, 139
Rectal Medicone	Sigmagen (PDR 807)
	Trilafon (PDR 808) 5
Decadron (PDR 735)	Schieffelin & Co
Diuril (PDR 735) 170, 171	Hennessy Cognac Brandy278
Hydeltra-T.B.A. (PDR 737)187	Schmid, Inc., Julius
Hydropres (PDR 737)102, 103	Ramese Dianhrasme & Jelly
Rediplete (Apr. Suppl.)	(PDR 802) 20
Hydropres (FDR 737) 102, 103, Rediplete (Apr. Suppl.) 206, 207 Tetravax (FDR 741) 142, 143 Merrell Cempany, The Wm. S., Kolantyl (FDR 744) 1FC Simron (FDR 745) 111	(PDR 802)
Merrell Company, The Wm. S.	Metamucil (PDR 811)196, 193
Kolantyl (PDR 744)	Shield Laboratories
Simron (PDB 745) 111	Riasol (PDR 813)
Simron (PDR 745)	Smith-Dorsey
"Thermo-Fax" Copying Machines 229	Nebralin (PDR 813)166, 167
riterino rax copying machines 220	Triaminic (PDR 814)
0 1	Smith, Kline & French Laboratories
Organon, Inc.	Combid Spanning (PDP 915)
Cortrophin-Zinc (PDR 745)202, 203	Combid Spansule (PDR 815) 55 Compazine (PDR 815, 816) 299 Daprisal (PDR 817) 4 Eskatrol Spansule (Apr. Suppl.) BC
Durabolin (PDR 745)38, 39	Daniel (PDR 917)29:
Ortho Pharmaceutical Corp.	Daprisat (FDR 317)
Diaphragms (PDR 756)181	Eskatroi Spansule (Apr. Suppt.) Bt
	Feosol Spansule (PDR 819) 153
Parke, Davis & Company	Stelazine (PDR 820) 264, 263
Benadryl (PDR 758) 12	Temarii (FDR 821)
Humatin	Temaril (PDR 821)
	Trophite (PDR 822)
Model GN Pel-Clave	Squibb & Sons, E. R.
	Kenacort (PDR 829)
Ataraxoid (PDR 767) 24 Cosa-Terrabon (Apr. Suppl.) 117 Niamid (PDR 769) 36 Terra Cortril (PDR 770) 244	Squibb & Sons, E. R. Kenacort (PDR 829)
Cosa-Terrabon (Apr. Suppl.)117	Strasenburgh Co., R. J.
Niamid (PDR 769)	Biphetamine-Ionamin (PDR 840) 47
Terra Cortril (PDR 770)244	U. S. Vitamin & Pharmaceutical Corporation
	Trypp Nose Drops
Reed & Carnrick	Upjohn Company, The
Tarcortin-Aerosol (PDR 779)127	Levanil (Apr. Suppl.) 26
Riker Laboratories, Inc. Disipal (PDR 783)	Neo-Oxylone Control of the Neo-Oxylone 104, 105
Disipal (PDR 783)	Oxylone (
Ritter Company, Inc., The	Wallace Vehenatories
Professional Equipment Plan 278	Walnee Laboratories 65 Appetrol (PDR 862) 65 Deprol (PDR 870) 260, 261 Milpath (PDR 870) 41 Milprem (PDR 870) 285 Miltown (PDR 870) 33, 23 Miltrate (PDR 871) 155 Long (PDR 871) 150
Robins Company, Inc., A. H.	Deprol (PDR 870) 260, 261
Ambar Extentabe (PDR 784) 185	Milpath (PDR 870) 41
Dimetane (PDR 785)	Milprem (PDR 870)
Donnagel Linea sur	Miltown (PDR 870) 33, 239
Dimetane (PDR 785) 5 5 5 5 5 5 5 5 5	Miltrate (PDR 871)
Robaxin (PDR 787)	Soma (Apr. Suppl.)
Robaxisal	Warner-Chilcott Laboratories
Roche Laboratories	Mandelamine (PDR 872)
Cantrisin (PDR 788 789) 9	Nardil (PDR 873)
Triburon & Triburon-HC	Paritrata 20 mg (Ang Sunul) 40
(PDR 794) 59 53	Paridium (PDR 974) 951
Passis & Company I D	White Laboratories Inc
Triburon & Triburon-HC (PDR 794)	White Laboratories, Inc. Disomer (PDR 878)
Mariana (FDR 793)	Disollier (FDR 979)
Maxipen	Dramemin-5 (Apr. Suppl.) 190, 191
Morer, Inc., Wm. H.	Vitamin A & D Ointment (PDR 880) 131
Maalox (FDR 795)193	Winthrop Laboratories, Inc. PNS Suppositories
	PNS Suppositories 20
Sandoz Pharmaceuticals	
The state of the s	Wyeth Laboratories
Fiorinal (PDR 802)	Bicillin Injection (PDR 885)218, 219
Fiorinal (PDR 802)	Bicillin Injection (PDR 885)218, 219 Equanil (PDR 886)256, 257
Fiorinal (PDR 802)	Bicillin Injection (PDR 885) .218, 219 Equanil (PDR 886) .256, 257 Oxaine .124, 125
Fiorinal (PDR 802)	Wyeth Laboratories 218, 219 Bicillin Injection (PDR 885) 218, 219 Equanil (PDR 886) 256, 257 Oxaine 124, 125 Sparine (PDR 890) 178
Fiorinal (PDR 802)	Wyeth Laboratories 218, 219 Bicillin Injection (PDR 885) 218, 219 Equanil (PDR 886) 256, 257 Oxaine 124, 125 Sparine (PDR 890) 178 Wyanoids HC (PDR 892) 148 Zactirin (PDR 892) 273

H

This Picture Could Be Changed...



with the PEL-CLAVE

Improper sterilization is a major cause of hepatitis. The number of cases in 1959 exceeded the total for 1958 by almost 50%.

PEL-CLAVEing eliminates the fear of infection and gives you the three-fold assurance of true sterilization:

1 IME

ien

, 61

PRESSURE

ALL FULLY AUTOMATED

Here is the only double chamber portable autoclave

that gives you proof of temperature — a thermometer in the discharge line. The automatic timer guarantees a complete cycle.



Ask your dealer or write to



nane company

CHARLOTTE 3, NORTH CAROLINA

Fine Professional Equipment Since 1900

MEDICAL ECONOMICS · MAY 23, 1960 299

Memo

From the Publisher

Staff Specialists

"Medicine's getting more complex every year," doctors often say to me. I can seldom resist replying: "So is medical economics!"

What is MEDICAL ECONOMICS' staff doing about it? The same thing the medical profession is doing: It's specializing.

Time was when there were no specialists on MEDICAL ECONOMICS' staff. The editors' job was (1) to get authoritative material from outside experts, and (2) to transform it into helpful, highly readable articles. This was a job for all-around journalists—not for medical men, not for economists.

In recent years, though, both medical men and economists have been added to the staff, along with other experts. They've brought inside some of the highly specialized knowledge that our journalists formerly had to go outside to get.

Thus, if the subject is health insurance, a staff writer can turn to Dr. Alfred P. Ingegno, who's active on the board of the country's

biggest Blue Shield plan. If the subject is hospitalization, he can turn to Dr. Irving M. Levitas, who's active on his hospital's executive committee. If the subject is practice management, he can turn to Horace Cotton, who became one of the country's best-known consultants in this field before joining our full-time staff.

Staff specialists like these have helped MEDICAL ECONOMICS—and therefore you—keep up with complexities ranging from closed-panel plans to open-shelf filing. So now we're generally enlarging on the idea:

Fourteen more staff specialists have just been appointed from among the magazine's full-time editors. Each specialist's assignment: to become the best-informed person around on one or two topics that are important to you. Topics like:

Your Associates
Your Home
Your Earnings
Your Liability
Your Estate
Your Office
Your Fees
Your Savings

Each staff specialist will continually review the literature, talk with leaders in his field, and keep MEDICAL ECONOMICS' writers and readers posted on it. Better posted than now? Yes, I'd say so. Just give this prediction a few weeks to come true, and then you can hold me to it.

-LANSING CHAPMAN

Pa

Supp



Patients with chronic rheumatoid arthritis or other collagen or allergic diseases often require the "tonic effect" as well as the anti-inflammatory effects of dexamethasone. For them, Decadeon has relieved fatigue and weakness, 4.5 increased appetite and often promoted a "real gain in weight" - "a definite therapeutic advantage in many patients requiring steroid therapy,"7

References: 1. Bunim, J. J., et al.: Arthritis & Rheumatism 1:313, 1958. 2. Silverman, H. L. and Urdang, A.: Ant. Prof. Pharm. 25:531, 1959. S. Rudolph, J. A., and Rudolph, B. M.: Ann. Allergy 27:710, 1959, 4, Spies, T. D., et al.: South, M. J. 51:1066, 1958, 5, Galli, T., and Mannetti, C.: Minerva med, 59:949, 1959. 6, Segal, M. S., et al.: Ann. Allergy 17:413, 1959. 7, Duvenci, J., et al.: Ann. Allergy 17:695, 1959.

Supplied: As 0.75 mg, and 0.5 mg, scored, pentagon-shaped tablets in bottles of 100 and 1000. Also available as Injection Decamon Phosphate.

Additional information on Decapnon is available to physicians on request.

DECADRON is a trademark of Merck & Co., Inc.

:adron

"THE MOST POTENT STEROID"! WITH "THE LEAST NUMBER OF SIDE EFFECTS"?

MERCK SHARP & DOHME, Division of Merck & Co., Inc., West Point, Pa.

he an as,

exect an

este-

ve nd m-

nel W he

sts m ne

ned pu.

ty

n-

lk

ep

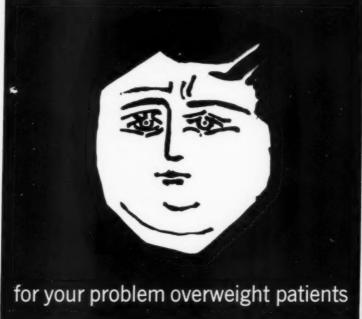
nd

ed

st

ks ın

N



NEW ESKATROL* SPANSULE®

brand of dextro amphetamine and prochlorperazine

orand of sustained release capsules

a logical combination of Dexedrine brand of dextro amphetamine) and Compazine brand of prochlorperazine that

- 1. curbs the appetite
- 2. relieves the underlying psychic stress
- imparts a sense of well-being throughout the day with a negligible incidence of restlessness and insomnia

SMITH KLINE (3) FRENCH

Dosage: One capsule in the morning. Prescription Size: Bottles of 30 capsules

*Trademark

S

ine)

mark